

# ANNUAL REPORT

ON THE

## HEALTH & SANITARY CONDITIONS

OF THE

### BOROUGH OF WEYMOUTH & MELCOMBE

### REGIS

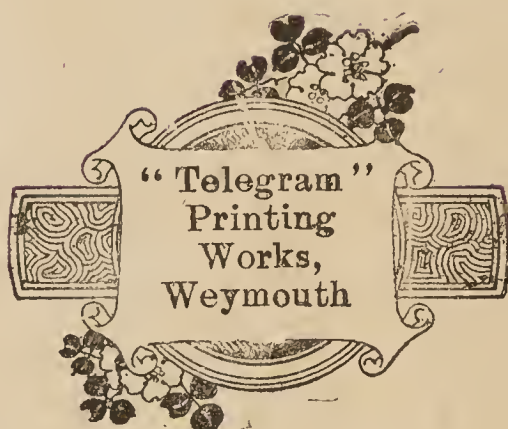
FOR THE YEAR 1919.



BY

W. B. BARCLAY, L.R.C.P., D.P.H., Etc.,

MEDICAL OFFICER OF HEALTH.



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*To His Worship the Mayor, and the Aldermen and  
Councillors of the Borough of Weymouth and Melcombe  
Regis.*

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*Enderby House,  
Weymouth,  
April 20th, 1920.*

GENTLEMEN,

In accordance with the instructions of the Ministry of Health, I have the honour of submitting herewith my fifteenth Annual Report on the health of your district and the work of the Health Department for 1919. I have followed as closely as possible the directions of the Ministry as laid down by Memo. <sup>9</sup><sub>Med</sub> dated January, 1920, though some portions of the Report had already been written ere the Memo. reached me.

The Vital Statistics are unsatisfactory; the Birth Rate too nearly approaches the Death Rate, whilst the Infantile Death Rate is unduly high.

The lack of suitable housing is the most crying need of the day, and reacts upon every phase of the work of the Health Department, retarding progress, and creating those conditions which have so detrimental an effect upon the Vital Statistics of the Nation.

Through the lack of houses, marriage becomes a difficulty, and the possession of a family is a barrier to the occupation of a house or even to obtaining lodgings.

It is creditable to this Authority, that a representation from the Maternity and Child Welfare Branch of the Health Department has invariably been acceded to, by giving priority for a municipal dwelling; thus in some small measure tending to arrest those conditions contributing towards the racial suicide of the nation.

During the past few years the work of the Health Department, whilst dealing with the health of the public as a body, has been extended more and more, to deal also with the health of the individual, thus adding continually to the duties and responsibilities of the staff, and rendering it more and more difficult to draw the line of demarcation between the prerogative of the medical profession and the duties of the Health Officer.

Thanks are due to the medical profession as a whole, that, throughout the years of transition, from their courtesy, kind consideration and mutual forbearance, no cause of friction or unpleasantness has ever arisen, and that the good fellowship of the past continues.

As in former years, the loyalty of the staff, and the feeling of comradeship that exists among them is of the utmost help and assistance, and cannot be too highly valued.

The Council generally, and the Maternity and Child Welfare Committee in particular, have benefited greatly, by the presence and practical knowledge and advice of the co-opted Lady Members to that Committee.

Your obedient Servant,

W. B. BARCLAY.

# Birth Rate. Death Rate and Analysis of Mortality for the Year 1919.

Provisional figures. Populations estimated to the middle of 1919 have been used for the purposes of this Table

	Birth Rate per 1,000 Total Population	ANNUAL DEATH-RATE PER 1,000 POPULATION.									RATE PER 1,000 BIRTHS		PERCENTAGE OF TOTAL DEATHS *			
		All Causes	Enteric Fever	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Violence	Diarrhoea and Enteritis (under 2 Years)	Total Deaths under One Year	Deaths in Public Institutions	Certified Causes	Inquest Cases	Uncertified Causes of Death	
England and Wales	18.5	13.8	0.01	0.00	0.10	0.03	0.07	0.13	0.47	9.59	89	23.9	92.5	6.2	1.3	
London ... ..	18.3	13.4	0.01	...	0.08	0.03	0.05	0.18	0.47	16.22	85	44.7	91.2	8.6	0.2	
96 Great Towns, including London (Census Populations exceeding 50,000)	19.0	13.8	0.01	...	0.13	0.04	0.07	0.14	0.45	12.24	93	29.2	92.3	6.9	0.8	
148 Smaller Towns (census Populations 20,000-50,000)	18.3	12.6	0.01	...	0.10	0.03	0.08	0.12	0.39	8.67	90	16.6	93.6	4.9	1.5	
Borough of Weymouth and Melcombe Regis ...	18.3	12.9	0.00	...	0.09	0.00	0.04	0.13	0.23	0.00	84.5	26.4	96.8	2.1	1.07	

\*—Non-civilians are included in these figures for England and Wales but not for other areas.



## NATURAL CONDITIONS OF THE DISTRICT.

### PHYSICAL FEATURES.

The Borough of Weymouth and Melcombe Regis is formed from the union of the two ancient and separate Boroughs of Weymouth and Melcombe Regis in 1571. The conjoined Borough was enlarged in 1895 by the inclusion of parts of the ecclesiastical parishes of Wyke and Radipole.

Though the whole Borough is now known popularly as Weymouth, it is easily distinguishable into two component parts, as the Harbour and its prolongation northwards the Backwater or Radipole Lake bisects it. These are united by two bridges. Melcombe Regis lies to the west of the Bay and north of the Harbour, and for Municipal purposes is divided into two Wards, North and South. The South Ward, consisting principally of the more ancient part of the Borough, is only slightly elevated over the sea level, the soil being sand and shingle to a depth of eight or ten feet. The North Ward is more modern, and to a greater extent residential, rising by easy gradients to a height of 108 feet and having a more varied geological formation, partly Oxford clay, with at places a bituminous strata rising to within two feet of the surface. Iron pyrites are largely diffused in the formation towards the North end, and sulphur-impregnated waters are found in this and neighbouring areas.

Weymouth lies to the West and South of the Harbour, and is also divided into two Wards, Weymouth and Wyke Regis. The former, composed of the more ancient portion, rises by steep gradients to a height of 175 feet, and has an entirely different geological formation from Melcombe Regis, the passage from the Oxford clay of the latter being well defined. The formation here is Coral Rag (Coralline Oolite), composed of alternating beds of coarse limestone, calcareous sands, occasional clay partings, and large concretionary masses of grit, the entire



thickness of the series being about 250 feet. The higher portions of this and the Wyke Ward have a Southern and Western exposure, overlooking Portland Harbour and the West Bay.

Public Gardens and open spaces abound throughout the Borough.

### CLIMATE.

Full details of the Meteorology are given in the Annual Meteorological Report, a comparative study of which for a series of years shows that the Town possesses one of the most equable climate in the country. Its rare geographical position, situated at the extremity of a promontory sheltered from the North and East by the Dorset Hills, with its beautiful crescent Bay facing the East, and with the pure, fresh and invigorating breezes from the English Channel fanning it from the West, its wealth of bright sunshine, its small rainfall, its soft yet invigorating atmosphere, free from any oppressive humidity, gives the Town a mild, equable and salubrious climate in the winter and a cool bracing air in the summer.

### METEOROLOGICAL SUMMARY.

Highest Maximum Temperature	82.4°F.
Lowest Minimum	27.1°F.
Mean Maximum	57.3°F.
Mean Minimum	44.1°F.
Mean Maximum and Minimum	50.7°F.
Difference from Average	—11.0°F.
Number of days on which rain fell	178
Total fall in Millimetres	823.4
Mean Relative Humidity	77.3
Number of hours of bright sunshine	1803.5
Days on which sun shone	301

The full Report of the Meteorologist will be found in the Appendix.

## OCCUPATION.

To a considerable extent Weymouth is a residential place. The principal business is that of Boarding-houses or Lodging-houses, some being wholly engaged in this, others being partially so. Other industries are Engineering, Brewing, Building, Shipping, and to a very small extent Fishing.

## CHARITIES AND HOSPITALS.

Several Charities of ancient date and comparatively small amounts exist for the benefit of inhabitants of the district. Three Voluntary Hospitals (two General, one Eye), in addition to the Poor Law Infirmary, provide for the medical needs of the Town and surrounding area.

## POPULATION.

Owing to the distance of time from the last Census and the extraordinary conditions prevailing during the last five years, anything like an accurate estimate of the population to the middle of the year, this being the date used for statistical purposes, is impossible. Using the different means at our disposal, and taking the rationing cards as being a reasonable indication, the Council fixed under their housing scheme the population to be 23,000.

The Registrar-General's estimate of the mid-year population is for birth rate 22,549 and for death rate 21,645.

I have no doubt that these estimates are considerably under the actual figures, the latter alone making the population less than at the Census year of 1911, which seems contradicted by the congested state of the houses generally. This low estimation of the population, of course, unduly inflates the death rate.



## WATER SUPPLY.

The Borough is supplied by a Private Company, which also furnishes supplies to various villages outside the Borough area.

The water springs from the upper green sand below the chalk at the foot of a hill near the hamlet of Sutton Poyntz, some three and half miles from the Town. A number of springs issue from the sides of the hill and run into a small collecting pond 80 feet above sea level, where it is strained and passes immediately to the pumping station, 40 feet lower, from whence it is pumped to two covered reservoirs at Preston, 160 feet higher, and at Wyke Regis, 185 feet higher. From the Preston reservoir it flows by gravitation to a covered reservoir at Rodwell to a height of 142 feet, and these supply the Town, the Wyke Regis reservoir supplying the higher parts of the district. These reservoirs contain only about one day's supply. The supply is on the constant system, and has never failed in sufficiency.

The most recent analysis shows the water to be of a high degree of purity, both chemically and bacteriologically. The temporary hardness is rather high.

## RIVERS AND STREAMS.

The River Wey as it enters the Borough becomes tidal, and broadens out into a large lake some 250 acres in extent, Radipole Lake, the Southern boundary of which is a masonry dam or Weir possessing lock gates, which at ebb tide retains a certain amount of tidal waters. At all times there is an influx of water over the weir.

For many years the growth of a Lettuce Weed, *Ulva Latissima*, has been a considerable source of trouble, annoyance and expense, to prevent the objectionable smell that



arises from its decay. After a prolonged struggle, lasting several years, the Council adopted a rational preventive method of dealing with this recurring nuisance, which I had advocated as far back as 1908, and last year's experience has amply proved that the fears of injury to fish life were chimerical.

Two small streams running entirely within the Rural District of Weymouth enter the lake on its Western side.

A small stream enters the Borough on its Western side, and, running through low-lying lands, passes under the Weymouth and Portland Railway, entering the upper part of the Harbour. This stream causes a fairly extensive section of marsh land in the Wyke Regis Ward of the Borough.

At the North-East end of the Borough the drainage from the higher agricultural land around passes through a series of dykes or channels, and by means of a culvert, thereafter, to the sea. These also cause a section of marsh land which extends considerably beyond the Borough area. These marsh lands of recent years have become the breeding grounds for mosquitoes, and for some years past extensive measures have been used for the destruction of the mosquito larvæ, by means of spraying with petroleum. Further measures are now being enforced to cleanse the watercourses of obstructions to allow of a freer flow of water and considerably lessen the extent of the flooding of the adjacent lands. At the end of the year, however, few of the owners had complied with the notices issued.

The River Wey and the streams from the Western side are polluted to a certain extent by the sewage of the Rural District. The alterations to Radipole Lake, sanctioned in 1914, and now to begin, will render it necessary to divert all crude sewage from the River Wey.

## SEWERAGE AND DRAINAGE.

The sewerage of the Town, so far as the sewers are concerned, is in the Department of the Borough Surveyor; the pumping of the sewage to the sea is in the Department of the Electrical Engineer. As reported in former years, I consider this joint control inadvisable.

The sewage, with the exception of two Districts, is collected in a large sewage tank with a second subsidiary tank as an overflow in times of storm. From the nature of the District these tanks are below sea level, and all sewage has to be lifted by pumps, passing through a rising and falling outfall sewer, to a point in the sea some 1,380 feet East of the Nothe, the furthest projecting point of land, and at a depth of 24 feet low water level, ordinary spring tides. After the extension of the Outer Pier, a complaint was made that the flow of the sewage had been diverted towards the beach. Observations were made at all states of the tide and winds, and the Harbour Master made an exhaustive series of tests by floats, with the result that the complaint was found to be without foundation.

Much of the storm water has been diverted in recent years, by a separate system of sewers direct into tidal waters, lessening the amount to be pumped to sea, and the diversion of the sewage in times of storm to the Backwater. Apart from the general system, there are two local sewers serving the Buxton district, which discharge direct to the sea in Portland Roads. The ventilation of the sewers is by upcast shafts and Webb's lamps. These latter are a considerable expense for upkeep, and as I reported a few years ago, of doubtful benefit. At any rate, any slight local ventilating action they may have is totally immensurate with their annual cost, and their replacement by upcast shafts would benefit alike the sewers and the rates,



Some years ago I urged the need for a surface water system, along the whole front of the Town facing the Bay, to replace the present catch pits discharging upon the sands. Apart from any other danger, the overflow from these is most unsightly after a rain storm, and this necessary improvement should not be forgotten in the near future.

The flooding of certain low-lying parts of the Town in times of storm, in consequence of the overloading of the sewers, has been overcome, no recurrence having been noted during the last six years.

### CLOSET ACCOMMODATION.

The Water Carriage System of excrement disposal is universal, only two houses on the outskirts of the Town using pail closets; no sewer being available in one case, and levels in the other not being suitable.

The enforcement of a flushing cistern for each w.c. ceased during the period of the war, and has not yet been resumed, though the number of closets still hand-flushed is now very small. The re-construction of house drains has again been resumed, and the use of iron drain pipes to replace stone ware is constantly urged both for efficiency and ultimate economy. Their use is becoming more prevalent, principally in the residential portions of the district. All house drains, with the exception of two which discharge direct into the Harbour, are connected to the sewers. These two exceptions have been reported so frequently that it almost seems hopeless to expect that the responsible Committee will exercise their powers of compulsion to the extreme length. Defective sewers, reported in previous years, but action allowed to be dormant during the war period, have not yet been remedied.



## SCAVENGING.

The collection of house refuse is by direct Corporation labour, and is under the Borough Surveyor's Department. The disposal is by means of a Destructor, which during a great portion of the year was under the Electricity Department.

Here again I do not find that the dual control tends to the best interests of the public health, though, since the resumption of the destruction of the refuse, in abeyance until the middle of the year, there is a distinct improvement, upon previous conditions.

The collections are made daily in the business part of the Town, and bi-weekly in the residential parts, in some few districts the collections being every alternate day. The reversion to the tri-weekly collection in all parts is strongly urged.

Under the Bye-laws each house must be provided with a suitable sanitary bin, and a clause in the Weymouth and Melcombe Regis Corporation Act gives the Council power to define the regulation dust bin, which must be of approved size and construction and made of galvanized iron or enamelled iron.

A beginning was made in 1912 to enforce the provision of a suitable bin to replace the heterogeneous receptacles, foul and uncovered, that were in almost universal use, but has been in abeyance during the past five years. Its enforcement has been again urged, but has not received sanction. The removal is by means of covered carts, as reported last year; some of these are without covers and others are only partially covered.

Upon the whole, this work is satisfactorily carried out, but is capable of improvement on the lines indicated above.

## SANITARY INSPECTOR'S REPORT.

*To the Medical Officer of Health.*

I beg to submit to you my annual report, dealing with the general sanitary work during the past year.

The General Order of the Ministry of Health, of the 13th December, 1910, Sec. 20, Sub-Sec. 16, gives instructions to Inspectors of Nuisances to submit to the Medical Officer of Health a tabular report as to their work during the year. This, in accordance with the latest Order, is restricted to a mere record of figures.

No. of visits paid	...	...	...	...	...	2327
No. of tests to drains	...	...	...	...	...	89
						Total ... 2416

Notices issued during the year:—

Statutory Notices	...	...	...	...	12
Informal Notices	...	...	...	...	23
					Total ... 35

Statutory Notices served and amended, 1919	...	8
Statutory Notices served, 1918, and amended, 1919...	...	4
Statutory Notices not complied with	...	4
Informal Notices served and amended, 1919	...	16
Informal Notices served, 1918, and amended 1919	...	5
Second Informal Notices served, 1919	...	2
		Total ... 39

The following table gives the number and details of the work accomplished:—

## No. OF HOUSES INSPECTED AND DEFECTS FOUND

No. of Houses	...	...	...	...	...	368
Defective drains	...	...	...	...	...	38
Insanitary yards	...	...	...	...	...	34
Foul and insanitary w.c. pans	...	...	...	...	...	31
Drains not disconnected or ventilated	...	...	...	...	...	27
Inspection chambers improperly constructed	...	...	...	...	...	14
Without and defective scullery sinks	...	...	...	...	...	17
Scullery sink waste pipes untrapped	...	...	...	...	...	18
Defective walls and ceilings	...	...	...	...	...	18
Dirty and dilapidated premises	...	...	...	...	...	10
Drains choked	...	...	...	...	...	20
Offensive accumulations	...	...	...	...	...	33
Defective gutters and down spouts	...	...	...	...	...	26
Fowls kept insanitary	...	...	...	...	...	1
Bell traps fixed	...	...	...	...	...	4

## No. OF HOUSES REMEDIED, etc.

No of Houses	...	...	...	...	...	39
No. of new buildings	...	...	...	...	...	1
No. of houses re-drained	...	...	...	...	...	
<i>a</i> Stoneware <i>b</i> Iron	...	...	...	...	...	33 <i>a</i> 2 <i>b</i>
No. of house drains repaired	...	...	...	...	...	4
No. of yards repaved	...	...	...	...	...	30
No. of yards repaired	...	...	...	...	...	4
No. of pedestal w.c. pans fixed	...	...	...	...	...	52
No. of flushing cisterns fixed	...	...	...	...	...	44
No. of disconnecting traps fixed	...	...	...	...	...	30
No. of ventilating shafts fixed	...	...	...	...	...	33
No. of fresh air inlets fixed	...	...	...	...	...	29
No. of traps fixed to bath, lavatory and sink waste pipes	...	...	...	...	...	56
No. of inspection chambers constructed	...	...	...	...	...	49
No. of gully traps fixed	...	...	...	...	...	69
No. of bell traps removed	...	...	...	...	...	4
No. of new scullery sinks fixed	...	...	...	...	...	22
Walls and ceilings of premises cleansed	...	...	...	...	...	19
Defective gutters and down spouts repaired	...	...	...	...	...	20
No. of complaints received	...	...	...	...	...	88
No. of choked drains cleared	...	...	...	...	...	20
Offensive accumulations removed	...	...	...	...	...	33

F. A FANNER, A.R. San. I.

*Sanitary Inspector.*



## PREMISES OR DWELLINGS WHICH CAN BE CONTROLLED BY BYE-LAWS OR REGULATIONS.

*Common Lodging Houses.* Two registered annually; both satisfactorily conducted.

*Houses Let in Lodgings.* Sanctioned in 1913. No action taken in consequence of dearth of houses; will now require amendment under the 1919 Housing Act.

*Tents and Van Dwellers.* Permanent quarters for the latter are in use, with the necessary sanitary conveniences.

*Dairies and Cowsheds.* Whilst these are rigidly enforced as far as circumstances allow, further and extended powers have long been necessary.

*Slaughter Houses.* Strict and almost daily supervision of these is carried out.

*Offensive Trades.* The various trades are as under:—Gut scraping, tripe boiling, fat extraction, dealer in rags, bones, animal skins or other putrescible matters, nettling or chitterling boiling, fish frying, and offal boiling. These number 24 in all, and as a whole are satisfactorily conducted.

## SCHOOLS.

The Public Elementary Schools are, generally speaking, in good sanitary condition and provided with a water supply for all purposes. An inspection of the Private Schools in the district is urgently called for. It was found necessary to close all Elementary Schools in the district from February 25th to March 24th in consequence of the prevalence of influenza and its complications.

## FOOD SUPPLIES.

### MILK.

Two-thirds of the milk supply comes from outside the Borough. The number of cowkeepers within the area is four, occupying five premises. Three of the four cowkeepers are also dairymen, supplying the public direct from the farms. Eighteen cowkeepers in the surrounding Rural area are registered as purveyors of milk within the Borough area; over their premises and methods of production, etc., we have no control.

During the year frequent complaints were made to us regarding the milk supply, and I found it necessary to issue the following circular to all dairymen or milk purveyors on the Borough Register:—

Dear Sir,

#### DAIRIES AND COWSHEDS.

Numerous complaints have reached me as to the keeping qualities of the milk supplied throughout the Borough, also as to the presence of sediment after standing.

During the period of great scarcity of labour, excuses were made, and had to be accepted, for these occurrences, but these conditions do not now exist, though the complaints continue.

I attribute the cause (1) to lack of cleanliness in production, (2) to lack of rapid cooling immediately after milking, (3) to insufficient sterilization of vessels, (4) to too frequent exposure to insanitary conditions.

It is imperative that all dairymen should take immediate steps to see that (a) the milker wears a clean overall, (b) that the hands are thoroughly washed before each cow is milked, (c) that the udders and teats of the cows are washed before

milking, and that no possibility of dirt or manure can enter the milking can, (d) that the milk is rapidly cooled immediately after milking, (e) that the milk vessels are thoroughly scalded by steam or boiling water, and stored at all times in a thoroughly sanitary place, (f) that the milk should be exposed as little as possible and never left uncovered.

Yours faithfully,

W. B. BARCLAY,

Medical Officer of Health.

This circular letter in usual course, reached the eighteen cowkeepers whose premises are without the Borough, but the major portion of whose milk is supplied within the district, and a storm of protest was raised as being undue interference with a neighbouring district. It was a storm in a teacup, but points to the difficulties that exist under the present Dairies and Cowsheds Order.

The milk being brought direct from the farm for delivery from door to door, the public naturally blame this Local Authority for all sins of omission and commission, which blame, however, should be laid upon other shoulders. The three largest dairies in the district have provided up-to-date plant for dealing with their milk. Steam plant for cleansing purposes, refrigerating apparatus for rapid cooling, and the most modern and sanitary methods of straining.

If only these with strict enforcement of sanitary methods of milking could be provided at the source of the supply, viz., the farm, complaints would be reduced to a minimum.

As shewn by the Chief Constable's Return, the quality of the milk as to fats, etc., is generally satisfactory.



## ICE CREAM.

Under the Weymouth and Melcombe Regis Act, 1914, special powers are given for regulating the manufacture and sale of ice cream or other similar commodities and for inspection of premises of any manufacturer, vendor or merchant or of dealer in ice cream or other similar commodity.

During the scarcity of milk and the rationing of sugar these commodities have been little, if any, manufactured, and action has not been reported.

## BAKEHOUSES.

The majority of these have, in recent years, from the gentle but persistent pressure applied, been re-modelled and converted into modern bakehouses, with steam ovens and other up-to-date appliances, tending to economy of labour, and fuel and to improved sanitary measures of dealing with this article of food. A high standard of cleanliness has prevailed.

## SLAUGHTER HOUSES.

Four buildings, with eleven occupiers, are licensed yearly. All animals are inspected by the Food Inspector before the meat leaves the premises, the butchers generally loyally co-operating with the Local Authority in this.

The question of the provision of a Public Abattoir has again been brought forward, but no definite decision has been made.

I have urged, and will continue to urge, that a public Abattoir should be established, but that unless powers are granted, if we do not already possess them, to make the Public Abattoir the Clearing House for all carcasses slaughtered and

intended to be sold for the food of man, i.e., that no meat of animals shall be offered for sale within the district until it has passed through the Public Abattoir and has been inspected and approved, the benefit to the public health is greatly lessened. This is proved by the past, that despite the knowledge of the ordeal of inspection in the Borough slaughter-houses, tuberculous and other diseased animals are occasionally found, the butchers being misled by appearances.

### OTHER FOODS.

A systematic inspection of all places where foods, other than those specifically mentioned, are manufactured, prepared or stored, for human consumption, is made, and with one exception, where careless methods generally prevail, are kept in a cleanly condition.

The Food and Drugs Act and Milk and Cream Regulations are administered by the Police, and come under the jurisdiction of the Watch Committee. The Return of the Chief Constable, who is the Inspector under the Act, is appended, and, following, the Return of Food Stuffs destroyed during the year.

Milk (Mothers and Children's) Order, 1918 : See Maternity and Child Welfare.



## SAMPLES TAKEN DURING THE YEAR 1919.

	No.	Genuine.	Adulterated.
Milk .....	23	20	3
Margarine .....	4	4	0
Lard .....	5	5	0
Butter .....	10	8	2
Sugar .....	2	2	0
Bread .....	3	3	0
Rice .....	1	1	0
Flour .....	1	1	0
Sardines .....	2	2	0
Sardine Paste .....	1	1	0
Cream .....	2	1	1
Egglets .....	1	1	0
Cheese .....	2	2	0
Beer .....	3	3	0
Baking Powder .....	10	10	0
Sausages .....	2	2	0
	—	—	—
	72	66	6

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Administrative Action regarding Samples not reported to be genuine. Year ending December 31st, 1919.

Name of article	Identification Number given to sample in report	Result of Analysis	If any legal proceedings were instituted under the Food and Drugs Act. State fines and costs separately.	If legal proceedings were taken under Acts other than the Sale of Food and Drugs Act.	If no legal proceedings were taken state briefly the course adopted in regard to each sample.	Information as to previous convictions.	Remarks on any point of special interest.
						For Quarter ending June 30th	For Quarter ending March 31st.
Milk	1.A.	Deficient in non-fatty solids	None	None	The Vendor appeared before the Watch Committee, gave an explanation and was cautioned.		
Milk	3.C.	ditto.	None	None	Vendor appeared before Watch Committee, gave an explanation and was cautioned by Town Clerk.		
Cream	1.A.	Preserved containing 0.20% boric acid	None	None	Vendor appeared before Watch Committee, gave an explanation and was cautioned by Chairman of the Watch Committee.		
Milk	3.C.	Deficient in fat.	None	None	Vendor appeared before Watch Committee, gave an explanation and was cautioned.		
Butter	1.A. & 2.B.	Margarine	Informal samples	None			



DATE.			ARTICLES.	APPROX. WEIGHT lbs.	MAGISTRATES ORDERS.	REMARKS.
4	1	19	Tripe.	9	1	Seized on inspection, unsound.
14	1	19	Tripe.	18	1	Seized on inspection, unsound.
21	1	19	Carcase of a pig.	240	1	Seized on complaint, general tuberculosis.
22	1	19	Carcase of a cow.	924	1	Seized on inspection at slaughter-house.
3	2	19	Carcase of a cow.	854	1	Seized at slaughter-house, general tuberculosis.
11	2	19	Tripe.	1052		Surrendered at cold storage.
12	2	19	Tripe.	18	1	Seized on inspection, unsound.
20	2	19	Herrings.	448	1	Seized at railway station, unsound.
29	3	19	Bloaters.	280	1	Seized at railway station, unsound.
11	4	19	Condensed Milk.	9		Voluntarily surrendered, blown.
14	4	19	Dates.	2912	1	Seized on inspection, unsound.
22	4	19	Cod and Haddocks.	672	1	Seized at railway station, unsound.
22	4	19	Six Chicken.	9	1	Seized on inspection, unsound.
29	4	19	Dates.	1456	1	Seized on inspection, unsound.
29	4	19	1 fore quarter of beef.	120	1	Seized on inspection, unsound (defrosted).
30	4	19	Rock salmon and haddocks.	100	1	Seized on inspection, unsound.
1	5	19	Portion of fore quarters of beef.	246	1	Seized on inspection, unsound (defrosted).
7	5	19	Dates.	1134	1	Seized on inspection, unsound.
14	5	19	Bloaters.	440	1	Seized on inspection, unsound.
19	5	19	Dates.	276	1	Seized on inspection, unsound.
22	5	19	Sheep's kidneys.	20	1	Seized on inspection, unsound.
23	5	19	Butter.	70		Removed from premises for special treatment, by order of Food Controller, unsound.
28	5	19	Carcase and organs of a cow.	747	1	Seized at slaughter-house, general tuberculosis.
11	6	19	Smoked fish fillets.	210	1	Seized on inspection.
7	7	19	Carcase of a cow.	636	1	Seized at slaughter-house, general tuberculosis.
26	7	19	Smoked fillets and haddocks.	168	1	Seized on inspection, unsound.
14	8	19	Hind quarter and part of fore quarter of beef.	348	1	Seized on inspection, unsound (defrosted).
15	8	19	Herrings.	532	1	Seized at railway station, unsound.
16	8	19	Cabbages.	784	1	Seized at railway station, unsound.
25	8	19	Tinned beef.	6		Surrendered, tin blown.
26	8	19	Pears.	36	1	Seized on inspection, unsound.
29	8	19	1 cheese.	56		
29	8	19	Corned beef.	21	1	Seized on inspection, unsound, tin blown.
8	9	19	Whiting.	112	1	Seized on inspection, unsound.
8	9	19	Herrings.	252	1	Seized on inspection, unsound.
8	9	19	Haddocks.	42		
8	9	19	Herrings.	112	1	Seized on inspection, unsound.
8	9	19	Carcase and organs of cow.	587	1	Seized at slaughter-house, general tuberculosis.
11	9	19	Fish.	112	1	Seized at railway station, unsound.
18	9	19	Pears.	196	1	Seized on inspection, unsound.
24	9	19	1 Bullock.	830	1	Seized at slaughter-house, general tuberculosis.
25	9	18	Fore quarter of beef.	252	1	Seized at slaughter-house, and belonging to neighbouring district, tuberculosis.
6	10	18	Sprats.	112	1	Seized at railway station.
10	10	19	2 cows' liver and lungs.	36	1	Seized at slaughter-house, abscesses.
15	10	19	Bloaters.	120	1	Seized on inspection, unsound.
3	11	19	Carcase and organs of cow.	560	1	Seized at slaughter-house, general tuberculosis.
22	11	19	Sheep's kidneys.	7	1	Seized on inspection, unsound.
8	12	19	Herrings.	196	1	Seized on inspection, unsound.
11	12	19	Carcase of bull.	534	1	Seized at cold storage, brought in from neighbouring district, diseased. Actinomycosis. Proceedings being taken.
24	12	19	Herrings.	224	1	Seized at railway station, unsound.
31	12	19	Cods and dabs.	42	1	Seized on inspection.
				19,177lbs.	45	





## INFECTIOUS DISEASES.

All adoptive Acts in connection with Infectious Diseases are in force.

Four hundred and eighteen cases were notified during the year, distributed as under:—

	No. of cases.	No. of cases removed to Hospital.
Scarlet Fever .....	14	11
Diphtheria .....	20	16
Measles .....	179	0
Rubella .....	22	0
Varicella .....	62	0
Ophthalmia Neonatorum ...	13	0
Enteric Fever .....	3	0
Erysipelas .....	7	0
Cerebro-Spinal Meningitis ...	1	1
Pneumonia .....	22	0
Malaria .....	11	0
Dysentery .....	1	0
Whooping Cough .....	1	0
Tuberculosis, Pulmonary ...	50	0
„ „ Other Forms...	11	0
Small-Pox (suspected) .....	1	1
	—	—
	418	29

Comparison with former years, except in the case of those diseases notifiable under the original Notification Act, 1889—11 in number—is not possible, as there has been added in recent years 11 other compulsorily notifiable diseases.

### SCARLET FEVER.

Fourteen cases were notified; of this number, four were notified tentatively and were removed to Hospital for observa-

tion, three in one family, and all ultimately proved not to be true Scarlet Fever. Two others, one of which was removed to Hospital, proved also not to be Scarlet Fever, and one other, isolated at home, was also in my opinion a similar case to the others and not Scarlet Fever.

The authentic cases appeared in August and September, affecting three houses, and in each case were direct introductions from outside areas, either visitors or brought in by visitors.

In one case, within a week of the arrival of some visiting children, stated to be recruiting after Measles, four inmates of the house developed Scarlet Fever. In the other cases they were visitors and developed the disease within four days of arrival. In each case the prompt notification and isolation prevented any further spread. The average number of notifications for the previous ten years was 20.4.

### DIPHTHERIA.

This appeared in January, and the whole outbreak was directly traceable to one child, the notification of the disease and its death reaching me simultaneously.

The remaining cases were school contacts or persons in the same family. Eleven houses were affected, three deaths resulting, the fatality rate being 15 per cent. Two cases were admitted to Hospital on an urgent message, but proved later to be Follicular Tonsillitis. The average number for the previous ten years was 20.1.

### ENTERIC FEVER.

Four cases were notified, one of these being from the Military Hospital, and is therefore not included in the civilian notifications. Of these three cases, the first was a re-

cently-returned prisoner of war from Turkey, and developed the disease some ten days after arrival. The second, some weeks later, came from France within the probable period of incubation. The third case, five weeks later, was also a recent arrival, but probably contracted the disease in this area. The house was insanitary from defective drainage, and there was a history of shellfish and uncooked vegetables, such as watercress, being partaken of about the time of infection. The cases were all treated at their own residence.

### CEREBRO-SPINAL MENINGITIS.

One case, that of a temporary resident in the Town, was notified and removed to Hospital, where he died four days later. This case had been ill six days before the disease was recognized and diagnosed.

Two other suspected cases were brought to my notice, but after examination and consultation were declared negative.

### MEASLES.

Sporadic cases of this disease were notified during the early months of the year, which increased somewhat towards June. In July and the first week in August the greater number of cases occurred, probably due to the Peace celebrations in the former month bringing children together, who under ordinary circumstances would have been kept apart. The onset of the school holidays checked any further outbreak. Towards the end of the year a slight outbreak occurred in a general hospital, three deaths resulting.

### INFLUENZA AND PNEUMONIA.

Early in the year Influenza again began to appear, the first cases coming to notice from the Military Hospital. During the short period in which the outbreak lasted it was



severe in its toll upon life. A few cases of Influenzal Pneumonia were notified again in November, but no general outbreak followed. The number of deaths actually occurring in the district from Pneumonia was 61, five of these being under one year of age; of this total, 46 were registered as being secondary to Influenza. Of the total number, 16 were soldiers and seven were persons whose ordinary residence was outside the area.

### MALARIA AND DYSENTERY.

Eleven of the former and one of the latter were notified, all being cases contracted abroad and when on Naval or Military Service.

Few of the cases were under any treatment, although every attempt has been made to induce the men to undertake the treatment for the eradication of the disease, but in only one case with success.

### OPHTHALMIA NEONATORUM.

Thirteen cases were notified. This is an increase upon any previous year, the average for the six previous years being 6.5. Probably increased inspection of infants, and the merited severity of the Central Midwives' Board upon midwives neglecting to send for medical aid and notifying cases of discharge from the eyes, has led to some slight increase of the cases, but the number is excessively high for the number of births, and is certainly an indication towards further measures for the prevention of Venereal Disease.

All the cases recovered completely without injury to either eye.

## SMALL-POX.

One case suspected to be Small-pox was tentatively notified, and removed to Isolation Hospital for further observation. A careful investigation and bacteriological examination proved beyond doubt that the rash, which closely simulated the pustular stage of Small-pox, was due to Venereal Disease (Syphilis), and the case was removed to the Hospital for such diseases. No action has been taken under the Public Health (Small-pox Prevention) Regulations, 1917.

## POLIOMYELITIS.

One case of this occurred towards the end of the year, though the knowledge of it, by some error, only reached me through the parent, too late for inclusion in this year's Report.

## PUERPERAL FEVER.

No cases were notified.

## BACTERIOLOGICAL LABORATORY.

This was re-opened during the latter part of the year, but little work has been required apart from examinations for suspected Diphtheria and blood films for Malaria.

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## MATERNITY AND CHILD WELFARE.

The work of this department has increased considerably during the year, though during a portion of the period the staff was reduced in number, from resignations, and difficulties experienced by the substitution of fresh Nurses, who had to acquire a knowledge of the district and the people.

There is no doubt that the work of the Centre, which aims principally at prevention, is much appreciated by those attending, and judging by the constant increases in the average monthly attendances, there is a gradual but persistent extension of the knowledge of its benefits amongst all classes and sections of the public. Whilst unmarried mothers and illegitimate children are welcomed, their numbers as compared with others are a mere fraction, less than 1 per cent.

Arrangements have been made with the Princess Christian Hospital whereby for an annual subsidy mothers and children are admitted as in-patients gratuitously for medical or surgical treatment, and the former for confinement, on the recommendation of the Medical Officer.

Cases of Ophthalmia Neonatorum are treated at the Eye Infirmary, it being necessary, however, for the patients to seek a subscriber's note, as the Corporation do not directly subscribe. No difficulty has been experienced in securing these. Where the infants are not treated at the Eye Infirmary, a Nurse undertakes the duty at the child's home. Further particulars are given under Infectious Diseases.

Measles, Whooping Cough, Epidemic Diarrhœa, Poliomyelitis, and Encephalitis Lethargica may be admitted to the Isolation Hospital. It has not been found necessary to admit any of these diseases during the past year. The greatest difficulty found has been that of providing for the



welfare of the infant and young child, who lack the support of a father, and where the mother is required to go out to work.

Foster-mothers of a suitable type and in proper dwellings have been scarce; the few of them found have required more money per week than the mother has been capable of earning, and many of these again would only undertake the care of the child during the day, rendering it necessary for the mother to undertake daily work only and pay for lodgings for herself and child or children. The provision of a Day Nursery for such cases has been urged, and early in the year the Council sanctioned the provision of a temporary building as such, and a wooden Red Cross Hospital was purchased, but, when the provision of a suitable site arose, such difficulties were placed in the way that the temporary scheme had to be abandoned, as the only suitable site, in the opinion of the Committee, was stated to be required for the provision of public gardens and recreation courts in the ensuing summer. At the close of the year the offer of a permanent building was secured, but the Council negatived the purchase. This decision, incidentally, was rescinded early in January.

A Ladies' Auxiliary Committee is attached to the Welfare Centre, who take a personal interest in the work, two attending by rota at each Welfare session, and providing tea for those attending. They influence mothers personally known to them to attend, bring cases requiring visitation to the knowledge of the staff, and act in every way as auxiliaries. Informally, the Centre closely co-operates with the Weymouth branch of the Salisbury Diocesan Association for Preventive and Rescue Work, and is in close touch with the Society for the Prevention of Cruelty to Children.

As the result of the demobilization of troops, unemployment, and the high price of milk, action has been taken under

the Milk (Mothers and Children) Order, 1918, and milk has been provided gratuitously, in amounts complying with the Order, to 13 families.

By arrangement with the majority of the dairymen of the district, they agreed to provide milk at 1d. per quart less than the ruling price for the time being, to such families as were certified by the Medical Officer of Health as being suitable cases for this reduction.

### **NOTIFICATION OF BIRTHS ACT**

#### **REPORT OF SENIOR HEALTH VISITOR.**

This Act came into force in 1909.

Infants are visited from the tenth day up to 12 months, and in certain cases until school age.

In 1919, 1,926 visits were paid to 372 infants.

Printed cards giving advice as to care and feeding of infants are distributed at the first visit, and also a leaflet of invitation to attend the Maternity and Child Welfare Centre.

In response to numerous requests, it was found necessary for the Medical Officer of Health to issue a dietary chart for children from one to five years of age.

Five hundred and eleven notifications, referring to 445 births, were received during the year; of these, 189 were notified by medical men, 308 by registered midwives, and 14 by parents.

In addition, 22 notifications were received referring to 20 still-births.



Forty-six illegitimate births were notified during the year, some of whom were the children of married women and widows.

How best to provide for the illegitimate child who is unwanted by its mother, and give it a chance of becoming a good and useful citizen, is one of the most urgent questions of the day. Not only is the child's presence a disgrace to the mother, but in most cases it is a serious handicap in her efforts to obtain a livelihood. Is it any wonder then that these children require the strictest supervision and unceasing care from the commencement?

It was to be hoped that some progress might have been made to improve the condition of these unfortunate infants, but public sentiment seems too strong. The fear lest anything might be done to encourage illegitimacy prevents definite action being taken, and instead of taking stern measures to eradicate the evil at its source, punishment and needless suffering are inflicted upon the innocent child. In this Borough the Infant Life Protection Act is administered by the Board of Guardians, the Visitor being the Relieving Officer. The Second Health Visitor was appointed as Honorary Visitor for six months on probation, during the year.

The Children's Charter does not, however, include supervision of those children who are "adopted" (in most cases for a large sum of money). Certain unscrupulous people are aware of this, and take advantage of the omission. The sooner the Act is amended to include those who are adopted for payment, the better.

In connection with those, I mention three cases which have come under my observation during the year, shewing the traffic that takes place in this way and the great need of the amendment of the Act.



(1) An illegitimate infant, born a perfectly healthy child, was adopted for a sum of £50, and died within three weeks, outside the area, though we took steps to inform the County Authority concerned, of its removal.

(2) Also an illegitimate child. The father, to avoid any publicity, was willing to pay a large sum of money to a woman to adopt the child. The negotiations were nearly completed, when, acting on advice, he placed the infant out to a good foster-mother, where it is being well cared for. Incidentally, during the week the proposed foster-mother had it in its care, she was feeding the infant on bread and milk, and this whilst it was three weeks old. The chances of it surviving the first year under this treatment were very remote. In the event of the child's death the sum of money she would have received would have made it a profitable transaction.

(3) A young unmarried mother advertized in the Press for someone to adopt her baby. She received 50 replies, all with one exception requiring a heavy premium.

Two prosecutions have taken place during the year: —

(1) The illegitimate child of a widow was found to be suffering from rickets, frost-bite and starvation; the home was destitute of comfort or cleanliness, and the mother leading an immoral life. The woman was prosecuted, and the case was adjourned for one month; at the conclusion of this time improvement had taken place, and the child placed with a foster-mother, where it was well cared for.

(2) An illegitimate child of a widow, consistently neglected from birth, never taken out of doors for an airing, living in one room, which served for living room and bedroom for self and two children, neglected and dirty. The woman was

in the habit of leaving the child for hours at a time, and had been frequently warned of the danger she incurred by doing so. The home was visited by the Medical Officer of Health and the Health Visitor, who found the infant tied in an improvised the chair. The child had slipped, and the Medical Officer of Health was just in time to save the child from being strangled. Magisterial proceedings ensued and the woman was sentenced to one month's imprisonment.

Another case. The illegitimate child of a widow was reported to the Medical Officer of Health. Its mother, it was supposed, having administered a drug to it when 15 days old, she was warned, and the child eventually recovered. Later on it was attacked with sickness and diarrhœa, and died at the age of 10 weeks. An illegitimate infant of a married woman was under constant supervision until finally it was adopted by the National Association for the adoption of unwanted infants.

Two other cases of illegitimate infants were very similar. Both women were posing as married women, but the children were so neglected and uncared for that they were kept under constant supervision.

Another infant was removed to the Princess Christian Hospital. The mother of the child ignored any advice which was given her, and never took the child out of doors in the air. This child was in a very emaciated condition.

Yet another case which concerns a married couple. The father, a skilled workman and in receipt of good wages, the mother out at daily work, the infant with other children left in the care of an elder girl. The parents have been repeatedly warned. Sometimes improvement is visible; sometimes a relapse occurs. A most difficult case, and one which requires careful watching, but the parents now refuse any admittance to the house or to bring the child for inspection. This same



family is alluded to in the School M.O.'s Report under "Employment of Children," the school child employed 57½ hours weekly.

The housing question is one of the most vital of all, affecting as it does the health and comfort of the children. How some of the wives and mothers contrive to rear their children at all, under the very unsatisfactory and adverse conditions of their home life, reflects great credit on their patience and ingenuity.

That the work will be far-reaching in its results is evidenced by the fact that during the past year numbers of our young mothers have departed to distant regions, to India, Australia, South Africa, Canada, and China.

During the year, in conjunction with the Infant and Maternity Centre, many of the infants were entered for a baby show. The competition was keen, and the judging showed that our babies were well up to standard, and could compare favourably with those of other towns.

It is very interesting to see with what pride and gratitude the mothers bring their infants to the Welfare Centre, to demonstrate by the condition of the children how they have endeavoured to carry out the instructions given them and the happy results they have achieved.

A. LETHBRIDGE,

*Senior Health Visitor.*



Maternity and Child Welfare Centre.

Staff	Mothers and Infants							Ante Natal			Mothercraft						
	Medical Officer	Superintendent	Other Paid Officials	No. of individual children attending during the year.	Total attendances of infants under 1	Total attendances of children from from 1 to 5	Total attendances of adults during the year	No. of individual mothers & children treated by M.O.	Total No. of consultations with M.O.	No. of children referred for Hospital treatment	No. of visits paid to homes of infants.	No. of individual expectant mothers attending Centre	Total No. of attendances during the year	Consultations with Medical Officer	No. of mothers admitted to Maternity Ward of Hospital	No. of lectures to school children	No. of children attending each lecture
	1	1	2	470	2576	1058	3665	237	780	12	1926	30	120	42	11	6	40

Table II.

(CAUSES OF DEATH IN WEYMOUTH AND MELCOMBE REGIS, 1919.

CAUSE OF DEATH. Civilian only.				Males.	Females	TOTAL.
ALL CAUSES				134	146	280
Enteric Fever ...	...	...	...			
Small-pox ...	...	...	...			
Measles ...	...	...	...	1	1	2
Scarlet fever ...	...	...	...			
Whooping cough ...	...	...	...		1	1
Diphtheria and cro up ...	...	...	...	3		3
Influenza ...	...	...	...	12	22	34
Erysipelas ...	...	...	...			
Pulmonary tuberculosis...	...	...	...	14	7	21
Tuberculous meningitis ...	...	...	...		1	1
Other tuberculous diseases	...	...	...		1	1
Cancer, malignant disease	...	...	...	10	16	26
Rheumatic fever ...	...	...	...		1	1
Meningitis ...	...	...	...	1	2	3
Organic heart disease ...	...	...	...	17	13	30
Bronchitis ...	...	...	...	1	6	7
Pneumonia (all forms) ...	...	...	...	8	3	11
Other respiratory disease	...	...	...	1		1
Diarrhoea, etc., (under 2 years)	...	...	...			
Appendicitis and typhlitis ...	...	...	...		1	1
Cirrhosis of Liver ...	...	...	...	1		1
Alcoholism ...	...	...	...			
Nephritis and Bright's Disease	...	...	...	2	2	4
Puerperal fever ...	...	...	...			
Parturition, apart from puerperal fever	...	...	...		1	1
Congenital debility, &c....	...	...	...	8	8	16
Violence, apart from suicide	...	...	...	4		4
Suicide ...	...	...	...	1		1
Other defined diseases ...	...	...	...	50	59	109
Causes ill-defined or unknown	...	...	...		1	1
Special Causes (included above) Cerebro-spinal fever						
Poliomyelitis...	...	...	...			
Deaths of infants under 1 year of age Total ...				17	18	35
Illegitimate				5	4	9
TOTAL BIRTHS				199	215	414
Legitimate ...				179	191	370
Illegitimate ...				20	24	44
POPULATION { For Birth Rate. ...					22549	
,, Death ,, ...					21641	

Table IV.

District—WEYMOUTH AND MELCOMBE REGIS.

## Infant Mortality During the Year 1919.

Nett Deaths from stated causes at various ages under 1 year of age.

CAUSES OF DEATH.	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 weeks	4 Weeks and under 3 M'ths.	3-6 Months	6-9 Months	9-12 Months	Total Deaths under 1 Year
Small-pox ...	...	...	...	...	...	...	...	...	...	...
Chicken-pox ...	...	...	...	...	...	...	...	...	...	...
Measles... ..	...	...	...	...	...	1	1	...	...	2
Scarlet Fever ...	...	...	...	...	...	...	...	...	...	...
Whooping Cough ...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup ...	...	...	...	...	...	...	...	...	...	...
Erysipelas ...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuberculous)	...	...	...	...	...	...	1	...	...	1
Convulsions ...	...	...	...	...	...	1	...	...	...	1
Laryngitis ...	...	...	...	...	...	...	...	...	...	...
Bronchitis ...	...	...	...	...	...	3	...	...	...	4
Pneumonia (all forms) ...	...	...	...	...	...	...	2	1	1	4
Diarrhoea ...	...	...	...	...	...	...	...	...	...	...
Enteritis ...	...	...	...	...	...	...	...	...	...	...
Gastritis ...	...	...	...	...	...	1	...	...	...	1
Syphilis ...	...	...	...	...	...	...	...	...	...	...
Rickets ...	...	...	...	...	...	...	...	...	...	...
Suffocation. overlying	...	...	...	...	...	...	...	...	...	...
Injury at Birth ...	...	2	...	...	2	...	...	...	...	2
Atelectasis ...	...	2	1	...	3	1	...	...	...	4
Congenital Malformations	...	...	...	...	...	1	...	...	...	1
Premature Birth ...	...	2	1	1	4	1	...	...	...	5
Atrophy, Debility and Marasmus	...	2	1	1	6	...	...	...	...	6
Other Causes ...	...	...	1	...	1	1	1	1	...	4
TOTALS ...	8	3	3	2	16	10	5	2	2	35

Nett Births in the year { Legitimate 370  
 { Illegitimate 44

Nett Deaths in the year of { Legitimate Infants 26  
 { Illegitimate Infants 9.



## MEMORANDUM.

The annual distribution of his returns of births and deaths and estimates of population for the past year affords the Registrar-General an opportunity of directing the attention of Medical Officers of Health and others using the returns to some points upon which experience has shown that misunderstandings tend to arise.

1. The numbers of births and deaths are those registered during the calendar year and are corrected for inward and outward transfer; they will differ therefore from uncorrected figures compiled locally either for the calendar year or for a period of fifty-two or fifty-three weeks.

2. The "death rate population" excludes all non-civilian males, whether serving at home or abroad. This is necessary for the purposes of local death rates, because it has proved impossible to transfer the deaths of non-civilians to their areas of residence or to deal in any other satisfactory manner with the local mortality of this element in the population. These estimates are based mainly upon the rationing returns kindly placed at the Registrar-General's disposal by the Ministry of Food.

The "birth rate (and marriage rate) population" on the other hand is intended to include all the elements of the population contributing to the birth and marriage rates. It consists therefore of the death rate or civilian population, *plus* all non-civilians enlisted from this country, whether serving at home or abroad. This non-civilian element has been distributed over all the districts in the country in proportion to their estimated civilian population.

3. The classification of some deaths is modified in the light of fuller information obtained from the certifying

practitioner in response to special inquiries. The principal subjects of these inquiries are indicated in a table published in the yearly reports of the Registrar-General; and this possible source of discrepancy between the returns of the Registrar-General and those compiled locally should be borne in mind, particularly in regard to the causes of death dealt with in that table.

General Register Office,

Somerset House,

London, W.C. 2.,

1st March, 1920.

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### **INFANTILE DEATH RATE.**

As this rate, that is the deaths of infants under one year of age, is calculated not on the population, which except in the census year can only be an estimate, and therefore subject to error, but on the number of births which occur during the year, the statistics are accurate.

In 1901, I wrote "It is a generally accepted fact that the infantile death rate is a sure and safe index of the progress of the district towards sanitation," and pointed out the moral deduced from the continued and steady decrease in the infantile death rate from the date the Council began to set their house in order in 1902 and by the increased progress made in this direction from 1908, when the entire Health Department was re-organized and a Health Visitor engaged.

In the quinquennial period 1898 to 1902 the average infantile death rate was 112.5 per 1,000 births, with a maximum

of 158; from 1903 to 1907 the rate was 111.4 with a maximum of 132; from 1908 to 1912 it descended much more sharply to 79.2 with a maximum of 101; and for the period of 1913 to 1917 the average reached 66.4 with a maximum of 81.

The war conditions during a portion of this latter period had a retrograde effect, to a limited extent. Mental strain and stress, borne by the mothers whose husbands were in the Army and Navy, lessened the vitality of the infant; and we had a slightly increased death rate from premature births and deficient vitality from birth, which continued through 1918. This was aided and assisted by the relaxation of the sanitary progress, some of it inevitable, some of it avoidable.

The partial return to normal conditions during the past year should have had a favourable effect, but despite the increased activity of the Child Welfare Centre the contrary has been the result.

It was not unexpected, as I strongly protested time after time during the war period against the retrograde steps adopted as war measures, in matters vitally affecting the public health, and warned those responsible of the inevitable aftermath.

A further contributing cause is the bad housing conditions. The fact that many families have had for a period of years to be herded into, at the most, two rooms, as lodgers, deprived of the usual amenities and comforts of life, does not tend to increase either the vitality of the mother or child. Until better housing conditions are obtained, much of the work of the Health Visitor and the Child Welfare Centre is rendered nugatory.

The number of infantile deaths actually occurring in the district is 39, giving an uncorrected death rate of 90.6 per



1,000, this being exceeded only twice in the past 14 years, these being in 1908 and 1911. Of this number, 40 per cent. died in Public Institutions, 35 per cent. in a General Hospital, and 5 per cent. in the Poor Law Institution.

Of the total, 20, or 51.3 per cent., are included under the headings of Congenital Malformations, Premature Births, Injury at Birth, Atrophy, Debility and Marasmus, and occurred within the first five or six weeks.

The corrected death rate slightly modifies these figures, as five deaths are transferred outwards, leaving a corrected number of 35, equal on the corrected birth numbers to an annual rate of 84.5, the highest recorded since 1911.

Of the total number of deaths, nine were those of illegitimate infants, equal to 25.7 per cent. of the whole. The infantile death rate of illegitimate children is equal to 204.5 per 1,000 illegitimate births for the year. What a contrast!

Much of this slaughter of the innocents is due to the pernicious system of "adoption" by foster-mothers for a sum of money. It is to their interest that the child should not live. Though unsatisfactory, we do not compare unfavourably with the country generally, being under the average of all. (See Analytical Index in Prefix).

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### DEATHS.

Three hundred and twenty-five deaths were returned to me as occurring within the area, equal to a crude death rate of 15 per 1,000.

The net or corrected rate as returned by the Registrar-General is 280, there being 61 deaths of non-residents trans-

ferred outwards and 16 transferred inwards. This is equal to an annual death rate of 12.9. This rate, whilst under that of England and Wales generally, is 0.3 above the average for the 148 smaller towns, amongst which we are classed, and therefore cannot be considered a very favourable one.

As shewn in the various causes of death, 34 deaths were certified as being due to Influenza, 23 to Tuberculosis (21 being of the Lungs), 30 to Heart Disease, 28 to Cancer, and 11 to Pneumonia.

Comparing the deaths from zymotic diseases with that of the rest of the country, as seen in the Analytical Table in the prefix to the Report, we have, with one exception, that of the deaths from Diphtheria (of which mention is made elsewhere) an excellent record, being under the average for the country generally and the 148 smaller towns in all.

Particular attention should be called to our blank record for Diarrhœa and Enteritis as compared with 9.59 per 1,000 for the country generally and 8.67 for the smaller towns.

It is in these latter and in the infantile deaths that the index of the activities and progress of the Public Health Department has to be sought.

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### **BIRTHS.**

Four hundred and twenty-six births were registered in this area, equal to an annual rate of 18.8. The corrected return is 414, equal to an annual rate of 18.3 per 1,000, estimated population.

The actual number of illegitimate births registered as occurring in the district is 49, but the allocation of these to their

different areas, and vice-versa, causes the corrected figures to be somewhat less, viz., 44. This is some slight improvement upon last year, but is still more than double pre-war days, being equal to 10.6 per cent. of the births.

The rates for the previous ten years are as under:—

1909	4.2 per cent.	1914	4.0 per cent.	1919	10.6 per cent
1910	3.6        „	1915	5.6        „		
1911	5.2        „	1916	8.3        „		
1912	4.5        „	1917	8.0        „		
1913	3.1        „	1918	11.1       „		

---

Average 4.1 per cent.

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Average 7.4 per cent.

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## SANITARY ADMINISTRATION.

(1) *Staff*. The Staff of the Health Department consists of

(1) The Medical Officer of Health, in administrative control.

(2) Sanitary Inspector, who is also Inspector under the Housing Acts and Meat Inspector.

(3) An assistant to the above, with three men engaged in the working of the Disinfector, drain testing, cleansing of conveniences, and other sanitary work.

(4) Senior or Superintendent Health Visitor, who is also a qualified Sanitary Inspector, and carries out inspection of such premises under the Factory and Workshops Act as employ females, with two additional Health Visitors, all being engaged as School Nurses.

(5) One Clerk.

The work of the Staff has given entire satisfaction throughout the year, being carried out conscientiously, expeditiously, and thoroughly.

## DISINFECTION.

Disinfection of rooms is generally carried out by means of a Mackenzie Pneumatic Sprayer and Formaldehyde, though other disinfectants are substituted as occasion requires.

Disinfection of clothing is by a Washington Lyons Disinfector, steam being had from the Destructor adjoining. During the major portion of the year it has been in use for

Military purposes, in addition to the ordinary civilian work. Undernoted is a schedule of articles disinfected :—

### ARTICLES AND ROOMS DISINFECTED.

	Military.	Civil.
Carpets .....	0	23
Curtains .....	0	120
Rugs .....	0	52
Cushions .....	1	41
Under Garments .....	1216	333
Outer Garments .....	579	273
Towels and Toilet Covers .....	142	158
Beds .....	290	21
Mattresses .....	2226	265
Pillows, Bolsters and Slips .....	1217	624
Quilts .....	12	66
Sheets .....	171	114
Blankets .....	29370	190
Vallances .....	0	4
Various Articles .....	274	179
Articles destroyed .....	0	1
	<hr/>	<hr/>
	35498	2474
Rooms .....	0	76
	<hr/>	<hr/>

Total ... 38048

(2) *Hospital Accommodation.* The Borough Isolation Hospital is situated in the Rural District of Weymouth, about two miles from the Town, and stands in  $5\frac{1}{2}$  acres of land. It consists of a Central Administrative Block, six detached blocks of two wards each, with the necessary duty room and other appurtenances. It provides accommodation for 70 patients and six different diseases. Three of the blocks and the nurses' quarters were provided by the War Department,

The maximum permanent staff has been Matron, six nurses, and the necessary domestic staff, but during the latter part of the year we have been enabled from the paucity of the cases to reduce these.

I have for several years called attention to the hardships undergone by the staff, from the insufficiency of accommodation provided for them. There is a lack of the ordinary amenities of life, with the result that there is a great difficulty in obtaining suitable staff, and an impossibility of retaining these for any length of time. These things do not tend towards that efficiency which is so essential to the welfare and comfort of those patients whose misfortune it is to be temporarily resident.

Contentment is a necessity of good service.

The admissions are as under:—

	Scarlet Fever.	Diphtheria	Cerebro-Spinal Meningitis	Measles	Varicella	Suspected Small Pox	Total
Civilian...	11	*13	1	...	...	†1	31
Military...	...	2	2	9	2	...	15
<b>Total</b>	11	20	3	9	2	1	46

† Proved not to be this disease.

\* Two of these were members of the staff.

During the financial year ending March 31st, 1919, there were 1,392 "patient days." The total cost per patient was £4 18s. 11d. per week, or, deducting the income received from patients (principally Military), a net cost of £3 19s. 2½d. per week.



The maintenance (food and drugs only) per head per day (including staff) is at the rate of 1s. 8 $\frac{1}{4}$ d.

## ADMINISTRATIVE OF LOCAL ACTS OR GENERAL ADOPTIVE ACTS.

The Weymouth and Melcombe Regis Corporation Act, 1914, supercedes the Weymouth Improvement Act, 1887. The clauses affecting the administration of public health give useful powers, but up to the present some of these have not been enforced, due to the continuance of abnormal conditions.

Section 57, amending Section 19 of the Public Health Acts Amendment Act, 1890, and removing the distinction between two or more houses belonging to different owners and two or more houses belonging to the same owner, as regards combined drainage, has been of great benefit, in settling, without legal action, the liability for repairs or removal, and allowing work formerly held up to be carried out without delay.

Sections 60 and 61, dealing with the re-construction and repairing of drains without giving notice to the Corporation, has had useful results during the year.

Action has been taken under Section 67, which enacts that a watercourse choked up is to be deemed a nuisance under the Public Health Act, 1875, as regards the marshlands on the outskirts.

Section 71, defining the establishment of an offensive trade, has been used, as regards the clause dealing with the enlargement of premises without consent.

Sections 72 and 73, dealing with ice cream, its manufacture and vending, have been practically in abeyance during the summer.

Section 77, dealing with the provision of regulation dust bins, has not been enforced, the reason for non-enforcement being given as the high price of galvanized iron. As there seems no likelihood in the future of any reduction in the price, this decision is in my opinion unfortunate.

Section 78, prohibition of blowing or inflating carcasses. An appeal upon this was made to the Ministry of Health to prevent the bringing in of inflated carcasses of immature veal, slaughtered outside the area; the Food Control Administration forcing the local butchers to either accept blown veal or have none at all. The Ministry upheld my contention, but the Food Control ignored this and continued the totally unnecessary, insanitary and dangerous habit, and the Health Committee declined to allow legal action to be taken.

Section 79, as to accommodation for cooking and storage of food in tenement houses, is not enforced, though much required.

The Public Health Acts Amendment Act, 1890, and the Public Health Acts Amendment Act, 1907, have been adopted, the sanitary clauses of these Acts being in general use.

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## HOUSING.

Conditions remain as formerly, with the exception that from a general lack of repairs during the past few years, the many courts and alleys, stated in previous Reports (dating back to 1896) as being in need of re-construction and re-arrangement, to remedy the evils of lack of air, ventilation, light, proper conveniences and sanitation, and the bad condition of the buildings, have had these conditions accentuated.

After considerable discussion as to the need for further housing accommodation, a need that we thought has been so long evident as to have got beyond the necessity of discussion, the Council, at the last possible moment for securing the proffered assistance of the Government, emasculated the Report of the Committee dealing with the housing scheme, by substituting 150 houses for the 400 there recommended. One can only exclaim "*Quicquid delirant reges, plectuntur populus.*" At the close of the year, apart from the need of providing houses for those who ought to be displaced from insanitary areas, over 200 houses being affected, there were some 250 applicants awaiting vacancies in the Corporation houses at the Pye Hill Estate.

In another place I mention the deleterious effect the bad housing conditions have upon infant welfare, and I cannot but attribute the increase of illegitimacy somewhat to these conditions. Where two or more families have been compelled for many years to occupy one house, not constructed for the occupation of more than one family, and the privacy of family life becomes more and more difficult as the children approach puberty, the finer moral feelings inevitably become blunted, and tend to lead to immorality. Poverty has been blamed for this herding of families in one house, and though poverty is disheartening and demoralizing, it is not altogether to blame for the prevailing conditions, as the majority of the people, so housed at present, are only too anxious and too willing to pay for a house of their own, were such procurable.



Three closing orders were made during the year; one of these only has been complied with. A house closed in 1917 has been re-occupied towards the close of the year without repairs and without the consent of the Local Authority. A house, closed the previous year, and an order for demolition made this year, has also been re-occupied during the year without the consent or knowledge of the Local Authority, but as an appeal has been lodged and the case is *subjudice* at the time of writing, no remarks can be made.

The total disregard paid in this and other instances to the legal enactments of the Local Authority seems to be a tendency of the times, and should be promptly and firmly dealt with.

#### HOUSING ACTS, 1890, 1909 and 1918.

The work of former years not completed remains as under:—

West Plain Area. Representation made 1911. Action still suspended.

Harmony Court, Nos. 1 to 6. Demolition orders made 1913 not yet complied with.

Park View Cottages. Demolition orders made 1912 not fully complied with. Postponed during the war.

Old Three Tuns, Maiden Street. Closing orders made 1917. Demolition order postponed indefinitely. At present occupied as workshops.

No. 1, Clarke's Court, mentioned *supra* as having been re-occupied.

A summary of the Report on Housing issued to the Ministry of Health by the Council is as under. It is to be

noted that this is the Council's Report, *not that* of the Medical Officer of Health, who differs in several material particulars.

**TABULAR STATEMENT IN REGARD TO INSPECTIONS UNDER SECTION 17 OF THE HOUSING, TOWN PLANNING ACT, CARRIED FORWARD FROM 1918.**

Number of dwelling-houses in respect of which Closing Orders were made by the Local Authority in 1918 and proceedings not terminated .....	1
Number of dwelling-houses which after the making of Closing Orders were made fit for human habitation	0
Number of dwelling-houses in respect of which Demolition Orders have been made .....	0
Number of dwelling-houses which have been demolished	0

**STATEMENT REQUIRED BY ARTICLE V. OF THE HOUSING (INSPECTION OF DISTRICT) REGULATIONS, 1910, IN REGARD TO THE INSPECTION OF DWELLING-HOUSES UNDER SECTION 17 OF THE HOUSING, TOWN PLANNING, ETC., ACT, 1909.**

Number of dwelling-houses inspected under and for the purposes of the Section .....	4
Number of such dwelling-houses which were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation .....	4
Number of dwelling-houses in respect of which representations were made to the Local Authority with a view to making of closing orders .....	4
Number of dwelling-houses in respect of which closing orders were made by the Local Authority .....	4

Number of dwelling-houses the defects in which were remedied without the making of closing orders ...	0
Number of dwelling-houses which, after the making of closing orders, were made fit for human habitation	0
Number of dwelling-houses in respect of which Demolition Orders have been made .....	1
Number of dwelling-houses which have been demolished	0

### FORM OF SURVEY OF HOUSING NEEDS.

#### Section 1.—Prevailing Conditions Affecting Shortage of Houses.

##### INDUSTRIES

1. Particulars as to the staple industries of the district (or of any parish or part of the district).

*Ans. :* Two Breweries, Ship Repairing and General Engineering Works, Ice Manufacturing, Bingleaves Torpedo Range; also (outside the area of the Council) Whitehead Torpedo Works.

2. Particulars of any anticipated industrial development.

*Ans. :* Nil.

3. Particulars of any considerable reduction which may be anticipated in the number of persons employed in any industry in the district.

*Ans. :* The number of workpeople at Messrs. Whitehead Torpedo Works has fallen from about 1,900 during the war to about 500 at present, and until it is known what is to be the future of these works it is



quite impossible to give any estimate. Although the works are outside the Borough, the Council in 1915 at the request of the Local Government Board undertook a scheme for housing a number of the employees.

The same difficulty arises in connection with the future of Portland Dockyard and the Bingleaves Torpedo Range; also the contemplated reduction in the Home Fleet, which will probably affect the Town to some extent.

#### POPULATION.

	<i>Ans.</i>
4. Pre-war population (1914) ... ..	23187
5. Average annual increase of population for five years before the war ... ..	212
6. Estimated present population ... ..	23000
7. Anticipated increase or decrease of working-class population, due to industrial changes ...	See reply to para. 3

#### EXISTING HOUSING ACCOMMODATION.

8. Number of dwelling-houses in the district ...	4954
9. Number of working-class houses of the type given in the reply to question 15 ... ..	2593
10. Average number of working-class houses built annually during the five years before the war...	27
11. Number of working-class houses built between January 1st, 1915, and December 31st, 1918,...	159

12. Number of empty buildings which might be
- (a) Made suitable by repairs or alterations for housing the working classes ... .. None
- (b) Converted into flats for the working classes.. None

## OVERCROWDING.

13. Tenements with more than two occupants per room ... .. Cannot say
- Number of tenements ... .. „ „
- Total number of occupiers ... .. „ „
14. Number of houses intended for one family only which are now occupied (without having been specially adapted) by two or more families ... .. Approx. 800

## RENTS.

15. Particulars of prevailing rents of the various types of working-class houses in the district.

Type of House.	Weekly rent.
(a) Houses with living room, scullery and two bedrooms ... ..	4/6 to 5/6
(b) Living room, scullery and three bedrooms	From 5/6
(c) Parlour, living room, scullery and two bedrooms ... ..	5/9 to 5/6
(d) Parlour, living room, scullery and three bedrooms ... ..	6/6 to 8/6
(e) Parlour, living room, scullery and four bedrooms ... ..	8/6 to 13/-

- (f) Tenements in block buildings ... 2/6 to 3/6
- (g) Other working class dwellings (specifying)  
 Back to back houses in courts or alleys,  
 two rooms ... 2/6 to 3/6

Section 2.—Estimate of Housing Needs.

No. of Houses.

1. Working-class houses required during the next three years to
  - (a) Meet the unsatisfied demand for houses (take account of growth of population, overcrowding, etc.) ... 100
  - (b) Re-house persons to be displaced by the clearance of unhealthy areas ...
  - (c) Replace other dwellings which are unfit for human habitation and cannot be made fit ...
  - (d) Replace obstructive or other buildings (now inhabited and not included under heading (c)) which should be demolished ... 150
  - (e) Replace other houses which, although they cannot at present be regarded as unfit for human habitation, fall definitely below a reasonable standard ...
  - (f) Meet anticipated deficiencies, e.g., arising from new industrial development ...

Total ... 250

2. Deduct—

- (a) Working-class houses which it is anticipated will be set free during the next three years as the result of any possible decrease in the population ... Approx. 100

See answer to para, 3



(b) Working-class houses likely to be built during the next three years by persons other than the Local Authority ...	0
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Total ...

Net estimate of number of houses required ...	150
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Details of figures given in reply to question 2b.

Public Utility Societies .....	—	—	—
Housing trusts .....	—	—	—
Industrial undertakings or business firms .....	—	—	—
Private persons .....	—	—	—

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Total which should agree with the reply to question 2b

Section 3.—Areas which are being or may have to be dealt with as being unhealthy under Part I. or Part II. of the Act, 1890.

Give particulars in table below of unhealthy areas which require to be dealt with :—

Specify Area	Ref. No. on Map (see Sec. 5)	Whether already officially represented as unhealthy	No. of Houses	Population approx.
East Street, including Courts.....	1	Partially	10	29
Governor's Lane, N. side from Maiden Street to East Street, extending to rear of Market Street .....	2	No	37	177

Lower St. Edmund Street and Foundry Cottages .....	3	No	5	20
New Court, West Street .....	4	No	6	21
John Street, N. side .....	5	No	6	21
Seymour Street .....	6	No	12	23
Part of New Street, with Courts..	7	Partially	7	19
Harmony Court .....	8	Yes	8	Nil
James Court, West Parade .....	9	No	4	12
Crescent Street (part with Courts)	10	No	9	42
Adelaide Court .....	11	Yes	4	20
High Street, North Quay and West Plain .....	12	Partially	50	205
East and West Row, Chapelhay Street .....	13	No	14	25
Franchise Court .....	14	No.	6	24
Wellington Place .....	15	No	15	67
Hope Street South and Hope Street Court .....	16	No	6	25
Gordon Row, Southampton Row, East Row, West Row (Fran- chise Street) .....	17	No	27	75
High West Street Court .....	18	No	5	13
Lodmoor Cottages .....	19	No	2	7
Totals			<hr/> 233	<hr/> 825

Ref. No. on Map (See Sec. 5 and column 2 of pre- ceding table).	Brief particulars of con- ditions which make area unhealthy.	Measures already taken as regards the area.	Further action to be taken by the Local Authority for dealing with the area (Give approx. dates)	Contemplated measures for housing displaced population
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	<p>The majority of these areas consist of Courts where the houses are built back to back, and have narrow entrances. In all, the districts are congested, houses pressing upon houses on all sides, causing obstruction to light and air, &amp; with no means of through ventilation. None of them possess the usual amenities of modern life</p>	<p>Improvements where possible in yard, paving and drainage have been carried out in some.</p> <p>Closing Orders are in force in one Court in No. 1 and No. 8.</p>		



Section 4.—Insanitary Houses (other than houses in unhealthy areas of which particulars are given in Section 3).

#### PREVAILING CONDITIONS.

- (1) How many inhabited houses are there in the district which are not and cannot be made fit for human habitation?
- (2) Number of persons inhabiting these houses?
- (3) How many houses are already subject to
  - (a) Closing orders?
  - (b) Demolition orders?
- (4) How many houses are seriously defective, but can be made habitable?

#### PROPOSED ACTION.

- (5) What immediate action is contemplated by the Local Authority with regard to
  - (a) Houses which are not and cannot be made fit for human habitation?
  - (b) Houses which are seriously defective, but can be made habitable?
- (6) Within what time is it contemplated that conditions will be such as to warrant the demolition of the houses which are not and cannot be made fit for human habitation?

Section 5.—Scheme of the Weymouth and Melcombe Regis Town Council for the provision of new houses under the Housing, Town Planning, etc., Act, 1919.

The scheme should include any proposals which have already been submitted for approval as assisted schemes,

1. Approximate number of new houses to be provided.

- (a) Houses with living room, scullery and two bedrooms.
- (b) Living room, scullery and three bedrooms.
- (c) Parlour, living room, scullery and two bedrooms
- (d) Parlour, living room, scullery and three bedrooms
- (e) Parlour, living room, scullery and four bedrooms.
- (f) Block dwellings (Number )  
Number of separate tenements.
- (g) Other dwellings (specifying types).

Various  
classes  
not yet  
decided  
on.

Total number of houses and separate tenements 150

2. Approximate number of existing empty houses to be acquired and :

(1) Made suitable for housing the working classes.

(2) Converted into flats for the working classes.

Approximate number of families to be housed  
under 1 and 2

Nil

(3) Approximate acreage of land to be acquired 16½

(4) Average number of houses per acre 9

(5) Approximate localities in which land is to  
be acquired

Westham  
(Wyke Regis)

(6) Time within which it is proposed that the scheme (or,  
if the scheme is to be carried out by instalments,  
each part of the scheme) is to be carried into effect :

Part of scheme.	Approximate date for completion.
Whole scheme.	About three years.

Any part of the scheme which has already been submitted  
should be referred to separately.

- (7) Particulars of any measure necessary as part of the scheme for the preservation of existing erections of architectural, historic or artistic interest, or for the preservation of the natural amenities of the locality.

None.

- (8) Any other provisions (including provisions for joint action with any other Local Authority).

None.

- (9) Is it anticipated that the scheme may subsequently require to be amended? If so, any relevant considerations should be stated.

*Ans. :* See answer to paragraph 3 on page 2.

For the reasons there given the Ministry are asked to extend time within which any further scheme may be submitted.

The above scheme was adopted by the Weymouth and Melcombe Regis Town Council at a meeting of the Council held on the 30th October, 1919.

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# ANNUAL REPORT

ON THE

## METEOROLOGICAL CONDITIONS

OF THE

BOROUGH OF WEYMOUTH & MELCOMBE  
REGIS

FOR THE YEAR 1919.



BY

GEO. NICOLSON, A.M.I.E.E.,

*METEOROLOGICAL OBSERVER.*





**TO THE CHAIRMAN AND MEMBERS OF THE  
HEALTH COMMITTEE.**

*Meteorological Station, Sunnybank,  
Westham, Weymouth  
January, 1920.*

GENTLEMEN,

I have pleasure in submitting the Statistics for the year 1919 of the Meteorological Department.

The Records of the Barometer are now taken in Millibars and the Rainfall in Millimetres, and at the request of the Meteorological Office I have this year given these values instead of inches.

Since the restrictions on Meteorological data were removed by the Government the daily details of the Readings have been sent to the Meteorological Office, who now supply the Readings to the Daily Press.

Weekly and Monthly Returns are sent to the Meteorological Office and the British Rainfall Organization, both these bodies now being under the Air Ministry.

Weekly Readings are also supplied to the Local Press.

During September an Inspector from the Meteorological Office inspected the Station and tested the instruments.

I am, Gentlemen,

Your obedient Servant,

GEO. NICOLSON, A.M.I.E.E.,

Meteorological Observer,

## REMARKS.

Sunshine during the past year was above the average by 64.7 hours, the total amount being 1,803.5 hours.

July was the disappointing month as far as sunshine was concerned, being below the average by 35.9 hours, with a total of 194.8 hours.

October with a total of 175.3 hours was an exceptional month for sunshine, being 66.1 hours above the average.

The total sunshine hours have been authenticated by the Meteorological Office.

Rainfall during 1919 was in excess of the average, the total amount, 823.4 millimetres, being 95.4 millimetres (3.755 inches) above the average.

January with 139.5 millimetres was 76.7 millimetres above the average.

Rainfalls of over 25.4 millimetres (1.00 inch) or more were experienced on February 16th, with 25.7 millimetres, July 19th, 27.7 millimetres; August 27th, 35.3 millimetres; October 24th, 28.2 millimetres.

August 11th provided the day of maximum temperature, when the mercury rose to 82.4°. November 30th recorded the minimum temperature of 27.1°.

The average mean temperature for the year was 50.7°, with a mean average range of 13.2°.

For a period of 33 days between May 17th and June 18th no rain fell, and this constitutes a record drought for Wey-

mouth, the previous longest drought being in 1911, when no rain fell for 29 consecutive days.

Thunder and lightning were only experienced once during the year, and this on Sunday, November 9th.

Gales were experienced once in January and twice in November.

The prevailing winds were West, 45.7 per cent. of the winds throughout the year being between N.W. and S.W.

### THE BAROMETER (Millibars)—9 a m.

Corrected for Temperature and Altitude.

1919	Mean	Difference from Average	Highest	Date	Lowest	Date
January ...	1008.0	-9.6	1037.5	24th	971.4	7th
February ...	1007.1	-6.2	1037.2	9th	979.4	17th
March... ..	1009.7	-2.4	1037.9	17th	995.2	20th
April ... ..	1015.7	+0.8	1038.3	21st	982.1	15th
May ... ..	1017.1	+1.4	1027.5	24th	1003.1	2nd
June ... ..	1021.7	+4.8	1034.0	10th	1012.4	12th
July ... ..	1017.5	+0.6	1027.9	31st	1002.5	1st
August ... ..	1017.0	+1.6	1025.9	12th	992.7	28th
September ...	1016.9	-0.8	1030.6	17th	997.0	23rd
October ... ..	1022.2	+8.2	1035.2	19th	1000.3	1st
November ...	1009.2	-4.8	1028.0	16th	996.2	27th
December ...	1011.6	-0.3	1028.1	19th	990.7	31st
Year	1014.4	-6.1	1038.3	21st April	971.4	7th January



1919	9 a m. Mean	Max Mean	Min Mean	Range Mean	Max & Difference Min from Mean Average	Highest	Date	Lowest	Date	Per cent Humidity
January	43.8	46.1	37.1	9.0	-5.3	52.0	14th	23.3	31st	85.8
February	38.5	45.4	35.3	10.1	-1.6	51.7	20th	28.5	1st	88.8
March	42.5	48.1	36.4	11.7	-1.6	54.4	3rd	29.2	26th	80.5
April	48.6	55.2	40.3	14.9	-0.1	72.2	19th	31.0	3rd	74.9
May	57.1	63.0	48.6	14.4	+2.0	72.3	31st	43.9	8th	73.8
June	60.9	67.6	51.3	16.3	+1.2	74.1	5th	46.2	26th	67.4
July	62.0	69.1	52.9	14.0	-2.1	79.0	10th	46.2	4th	71.8
August	65.8	71.4	56.3	16.1	+1.6	82.4	11th	45.7	30th	72.4
September	60.0	66.7	51.7	15.0	-0.7	77.0	11th	36.2	29th	78.5
October	50.9	58.0	42.4	15.6	-3.3	69.0	5th	32.4	17th	75.3
November	40.1	46.4	36.1	10.3	-7.3	56.3	24th	27.1	30th	87.1
December	46.0	50.7	41.2	9.5	-1.0	54.6	4th	31.1	1st	86.5
Year	51.1	57.3	44.1	13.2	-11.0	82.4	11th August	27.1	30th Nov	77.3

Bright Sunshine

As Registered by the Campbell—Stokes Recorder.

1919	Actual Sunshine	Difference from Average	Greatest Daily Amount	Date	Days on which Sun Shone	Sun- less Days	Difference from Average	Average Amount of Cloud 0-10
January	63.7	+ 6.5	7.0	24th	21	10	-2	7.2
February	62.6	-16.0	8.3	8th	17	11	+4	6.7
March	133.8	+ 9.2	11.4	30th	27	14	-2	6.6
April	201.4	+19.1	11.6	21st	30	0	-3	6.0
May	206.2	-17.1	13.9	13th	29	2	...	6.6
June	232.8	+16.2	14.3	21st	29	1	-1	5.5
July	194.8	-35.9	14.6	13th	29	2	...	6.8
August	246.1	+33.2	14.0	8th	29	2	...	5.4
September	166.5	+ 1.4	11.5	11th	27	3	...	6.0
October	175.3	+66.1	10.0	3rd	27	4	-2	4.2
November	70.9	- 9.6	7.3	12th	21	9	...	6.4
December	44.4	- 8.4	7.0	8th	15	16	+3	7.5
Year	1803.5	+64.7	14.6	13th July	301	54	-3	6.2

Rainfall—Millimetres.

1919	Total Amount	Difference from Average	Wet days of 0.2 millimetres or more	Difference from Average	Wet days of 1.0 millimetres or more	Mean Wet Day. Rate of Rainfall	Greatest Fall in 24 hours	Date of Greatest Fall
January ...	139.5	+76.7	23	+8	23	4.5	18.5	3rd January
February ...	93.4	+34.0	15	+1	11	3.3	25.7	16th February
March ...	118.8	+57.4	20	+4	15	3.8	18.7	18th March
April ...	36.3	-1.0	13	+1	9	1.2	9.4	13th April
May ...	20.5	-23.1	12	+1	4	0.6	5.5	11th May
June ...	18.7	-16.8	5	-5	5	0.6	9.9	20th June
July ...	55.0	+9.6	12	-2	8	1.4	27.7	19th July
August ...	65.1	+2.8	13	+1	8	2.1	35.3	27th August
September ...	33.3	-18.5	10	-1	6	1.1	7.5	3rd September
October ...	47.0	-54.4	7	-10	4	1.5	28.2	24th October
November...	75.2	+6.1	23	+9	11	2.5	24.1	9th November
December...	120.6	+22.6	25	+6	20	3.9	21.2	1st December
Year	823.4	+95.4	173	+17	124	2.2	35.3	27th August

Wind.

Observed Daily to 16 points; but reduced in this Table to 8 points of the Compass.

1919	N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	Calm
January	6	4	2	0	2	4	9	2	2
February	1	7	11	3	2	1	1	2	0
March	7	2	3	1	0	6	5	6	1
April ...	8	...	4	0	1	1	12	3	1
May ..	2	2	6	10	1	4	6	0	0
June ...	1	1	2	3	3	5	11	4	0
July ..	10	2	6	2	0	1	7	2	1
August	2	3	1	1	3	5	13	3	0
September	4	2	6	1	2	5	7	0	3
October	8	3	3	1	6	0	2	5	2
November	7	8	1	0	0	3	7	2	2
December	2	0	0	0	5	5	14	3	2
Year	58	34	45	22	25	40	94	33	14





ANNUAL REPORT

ON THE

EDUCATION (ADMINISTRATIVE PROVISIONS) ACT

OF THE

BOROUGH OF WEYMOUTH & MELCOMBE

REGIS

FOR THE YEAR 1919.



BY

W. B. BARCLAY, L.R.C.P., D.P.H., Etc.,

SCHOOL MEDICAL OFFICER.



**TO THE EDUCATION COMMITTEE OF THE BOROUGH  
OF WEYMOUTH AND MELCOMBE REGIS.**

*March, 1920.*

LADIES AND GENTLEMEN,

I have the honour to submit to you my eleventh Annual Report on the work of the School Medical Service.

During the past year there has been a considerable extension of the work as regards treatment in all branches.

Much more minor surgery is done than formerly, and the treatment of all contagious diseases has been carried out directly by the School Nurses, alike to the benefit of the children and the School attendance.

To further approach the completion of the School Clinic it is necessary that a scheme should be devised for the treatment of diseases of the nose and throat.

The excessively large numbers of diseases of the throat left untreated each year is detrimental to the present and future welfare of the child. I have for many years past urged that the Education Committee should provide the means for surgical treatment of Adenoids and Enlarged Tonsils, and I hope that sanction will now be given for such.

I am,

Ladies and Gentlemen,

Your obedient Servant,

W. B. BARCLAY.



### GENERAL INFORMATION.

The Education Authority for the Borough is the Town Council, who have delegated their duties, except the financial provisions, to the Education Committee, consisting of the Mayor, with twelve members of the Town Council and nine nominated members representing various social and religious bodies in the Town, two of whom are ladies.

The number of Elementary Schools remains as in former years, seven, with fourteen departments, four boys, four girls, five infants, and one mixed.

The number of school places is returned to me as 3,400, with average number of children on the Register 3,060. The average attendance is 2,803. At Holy Trinity Schools in all departments the number of children on the Register exceeds the accommodation, whilst the average attendance equals or closely approximates to the same. The margin between the accommodation provided and the numbers on the Register at St. John's Schools, all departments, and Melcombe Regis Boys' School, is a very narrow one.

*Staff.* This has been increased somewhat over the 1914 basis, and consists now of School Medical Officer, who is also Medical Officer of Health, two part-time School Nurses, with the assistance, when not otherwise employed, of a third Health Visitor, School Attendance Officer, a part-time School Dentist, and a part-time clerk.

*Organization* remains as formerly. Each Department, with two exceptions, is visited for the systematic Medical Inspection, and re-examinations of defects found, once every three weeks; the two exceptions, St. Paul's and St. Augustine's, as occasion requires, but not less than once in each session. The School Nurses visit all schools for inspections and re-inspections much more frequently.

The systematic Medical Inspections are held for each department on the same day of the week and at the same hour, 8.45 a.m., throughout the year. Notices are sent to the parents previously, informing them of the day and hour, and inviting them to be present, an invitation which is, in the infant departments, accepted by 60 per cent. of the parents, but to a lesser extent for the intermediate examinations in other departments, and still less for the final examination for leavers.

Where defects are found, verbal instructions are given if the parent or guardian is present, and in addition a written notice is sent in all cases, and, if considered necessary, the parent, if not present, is invited to have a personal interview with the Medical Officer, or a Nurse may visit the house to explain matters and advise.

Generally speaking, the advice tendered is received by the majority of parents with gratitude and acted upon, though an occasional wiseacre assumes that his or her medical knowledge far exceeds that of the Medical Staff. In such cases we divert from the *suaviter in modo* to *fortiter in re*, though happily during the past year it has only been found necessary to prosecute one parent or guardian under the Children's Act for neglect, the prosecution being undertaken by the National Society for the Prevention of Cruelty to Children, with whom we actively co-operate.

The statistics in connection with inspection and treatment of children will be found in Table 5. In addition, there were 1,334 children examined at the School Inspection Clinic, held daily at 10 a.m. Of this number, 950 were certified as being unfit to attend school for varying periods, as the result of some illness or injury. Two hundred and forty-six certificates were issued for return of children to school after infectious or contagious diseases.

Special examinations at school for verminous or contagious conditions by Medical Officer or School Nurses numbered 1,405.

Cleansing orders were made in connection with verminous children in five cases; four were complied with, whilst one was compulsorily cleansed.

The number of visits to different departments of schools is: Medical Officer, 84; School Nurses, 275; of School Nurses to the homes of children, 67.

The School Attendance Officer makes the following return of action taken by him: --



## Record of Proceedings taken under the School Attendance Byelaws.

89		No. of Parents reported to School Attendance Committee
104		No. of Children affected
38	Attendance Orders	No. of Prosecutions ordered by School Attendance Committee for
13	Breach of Byelaws, non-compliance with orders made	
1	Industrial Orders	
38	Attendance Orders made	How disposed of by Magistrates
13	Fines Imposed	
Case adjourned for 3 months from 19-12-19	Industrial Orders	
1		For unlawfully employing a child
£9 0 0		Total amount of Fines and Costs inflicted

### TREATMENT CLINIC.

This is limited to minor ailments, Contagious Diseases, these latter including Ringworm, Scabies, Impetigo, and cleansing of verminous cases, and Dental Treatment.

There has been an increase in all the former over the previous year.

Ringworm cases numbered 24 of the scalp and three elsewhere. The period of treatment in scalp cases took five to eight months; in face or body cases as many days. The question of the substitution of X Ray treatment is being brought forward, as being economically preferable, substantially limiting the loss of grant to the Education Authority, and the loss of education to the individual.

The Scabies cases numbered 53 (affecting 22 houses), and in nearly all cases affected whole families, in some, two families occupying the same house. Where a case has been found affecting a school child, all inmates of the same house have been examined and all treated at the Cleansing Station, reaching a total of 63. The usual period of treatment has been three days, and this has never failed under our hands to effect a permanent cure. All clothing and bedding on the first day of treatment is passed through the Steam Disinfector.

As an example of the difference between home treatment of this disease and that at the Cleansing Station, may be cited one case (of several), that of an adult connected with the Education Authority. The prolonged absence from duty led to the requirement of an examination by the School Medical Officer. The condition of the patient was pitiable, covered with Eczema and sores from scratching, from the tip of the toes over the whole body and arms to behind the ears. Sleepless nights had required opiates or other sedatives. Treatment was offered and accepted. The first bath caused considerable

suffering, but after a third the severe itching disappeared entirely. The Eczema, etc., disappeared rapidly, and within two weeks school duties were able to be resumed, after a total absence of 11 weeks.

Impetigo cases were none of them severe, and few in number. Advice, prescriptions, and in some cases the necessary medicament, were given.

Verminous cases numbered 123. None of them were so glaringly bad as in the early days of the School Medical Service, and no prosecutions for neglect under this heading were necessary. Five cleansing orders were sought, but in only one was compulsory cleansing necessary. There is much improvement generally with regard to this.

Minor ailments consisted of slight surgical work and dressings, treatment of colds, coughs, stomachic complaints, Blepharitis and deafness due to impaction of wax, etc.

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### **DENTAL CLINIC.**

Though this was sanctioned in 1918 and a beginning made in October of that year, the work was suspended, through sickness, until the beginning of 1919, but has been systematically carried on throughout the year.

Three hours weekly are allocated for Dental work, and it is carried out in the School Clinic.

The organization is as follows:—The School Dentist visits each of the Infant Departments and inspects all children and compiles a list of those requiring treatment; the School Medical Officer also refers any case coming under his observation. The following notice and memorandum are then forwarded to the parent or guardian:—



## SCHOOL MEDICAL SERVICE.

Enderby House,  
Weymouth.

To the Parent or Guardian of .....

The teeth of the above-named child have been reported by the School Dentist to be in immediate need of attention, the result of disease or decay. The necessary treatment will, with your consent, be carried out by the School Dentist free of charge, on your signing this, and returning to me in enclosed envelope, when an appointment will be made.

W. B. BARCLAY,

School Medical Officer.

Signature of Parent or Guardian .....  
Date .....

## SCHOOL MEDICAL SERVICE.

Enderby House,  
Weymouth.

Arrangements have been made by the Education Committee for the treatment of the children attending the Elementary Schools in the Borough.

The importance of keeping the mouth and teeth in a clean and healthy condition cannot be too thoroughly urged upon parents. The mouth being the "gateway of the body" through which all the food eaten and some of the air breathed enters, it is essential that it should be kept in a thoroughly healthy and cleanly condition.

Diseased teeth, or Dental Caries, though not of itself an immediately dangerous disease, causes an unnecessary amount of suffering, and it is the forerunner of many grave conditions. The swallowing of the products of putrefaction and disease germs, which abound in and around diseased teeth, together with the loss of proper mastication or chewing of the food- leads to impairment of general health and

malnutrition, and in consequence an arrest of both the physical and mental development. The local poison in the mouth leads frequently to inflamed and enlarged glands in the neck, and these pave the way to tuberculosis and consumption.

The earlier dental treatment is commenced, the less needs to be done; less pain is caused and more lasting results are accomplished. *It is most important that the first or temporary teeth* should be attended to, as the second or permanent set are in the jaw at the same time, and disease or decay of the first teeth seriously harms the second ones, and decay will sometimes start from this cause before they are cut.

The School Dentist, Mr. E. Farwell, L.D.S., will attend at the schools to inspect the children, and any treatment necessary will, with the consent of the parents, be carried out by him at the School Clinic, Enderby House. The treatment will be free, and it is earnestly hoped that parents will avail themselves of this opportunity to promote the health and welfare of the children.

W. B. BARCLAY,

School Medical Officer.

On receipt of the notice signed by the parent an appointment card as follows is then sent:—

Enderby House,  
Weymouth.

SCHOOL MEDICAL SERVICE: DENTAL CLINIC.

Dear Sir or Madam,

The School Dentist will attend at above address  
on Wednesday .....

Please see that .....  
attends punctually at ..... and presents this card  
to the School Nurse.

It is advisable that some responsible person attends with the child.

W. B. BARCLAY,  
School Medical Officer.

A list of the children with their hours of appointment is sent to each school affected.

The School Medical Officer and a School Nurse are present throughout the session.

No extractions are made without an anæsthetic, either local or general. General anæsthesia (which has invariably been nitrous oxide gas) is administered by the School Medical Officer.

Seven hundred and twelve notices were issued. Twenty parents or guardians definitely refused to have anything done; 25 children had left the area before their appointment was reached; 17 failed to keep the appointment; 259 ignored the offer made entirely, and 308 were treated.

It is evident that we have only touched the fringe of the subject and that a further extension is necessary so that the permanent teeth of the elder children may also be conserved.

The School Dentist reports as under:—

**DENTIST'S REPORT FOR THE YEAR ENDING  
DECEMBER 31ST, 1919.**

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In starting the School Dental Clinic it was advisable to commence with children between the ages of six and eight years.



These ages are selected because during this period the permanent teeth begin to make their appearance, and while not overlooking the value of the temporary dentition it is obvious that the permanent teeth are of greater importance; the earliest date was brought to combat caries arising in them.

The schools included in the plan were visited and the children of above ages, numbering 784, were examined.

Of these, it was found that 629 required treatment, 80 per cent.

Summary of Work done for year ending December 31st, 1919.

No. of children examined	.....	784
„ children requiring treatment	.....	629
„ children treated	.....	308
„ teeth filled	.....	466
„ teeth extracted (local anæsthesia)	.....	439
„ teeth extracted (general anæsthesia)	.....	308
„ children treated under local anæsthesia...		177
„ children treated under general anæsthesia		79

E. FARWELL, L.D.S.

### EMPLOYMENT OF CHILDREN.

In November, 1908, I presented a report to the Education Committee dealing with the subject of the employment of children before and after school hours and in the dinner hour, and the evil effects it had upon their physical welfare. During the ensuing years I returned to the matter, but it was not until 1913 that bye-laws under the Employment of Children Act were sanctioned. These unfortunately were restricted to clause 2 of that Act and dealt only with street trading, and during the years they have been in force have been more honoured in the breach than in the observance,

For many years I have urged that no school child should be employed without previously being certified by the School Medical Officer that such employment would be in no way detrimental to their physical welfare, it being considered that the medical examination should take place prior to their employment rather than afterwards, as being less likely to cause friction. With the assistance of the head teachers I had a register made of all children employed part time, with their actual hours of work each day, and, when completed, made the following report to the Education Committee:—

“I have in previous years called attention to the evil influence upon the moral and physical welfare of the child of part-time employment when attending school. I have had a register made of all boys so employed, with the hours of their daily employment and the names of their employer, and the result exceeds my worse anticipations.

“Amongst the worst cases are boys 10 years of age employed half an hour each day at mid-day and two hours each evening and 9½ to 10 hours on Saturdays; boys of 11 employed from 7.30 in the morning to school time, three-quarters of an hour at mid-day, and again two and three hours in the evening and 10 to 12 hours on Saturdays and holidays. In some cases boys from 10 to 12 are employed two to three hours daily at mid-day and evening and longer on Saturdays and holidays in connection with public-houses.

“In the majority of cases the boys are from 12 to 13 and are employed anything from 30 to 39 hours per week; in some cases putting in 12 to 14 hours' work on Saturdays and holidays, starting work as early as 6.30 in the morning, and some finishing at 10 at night.

“Sunday work is not uncommon in addition. The employment register for girls is not yet complete, though the



numbers employed are very much less. I strongly urge the extension of the bye-laws made under the Employment of Children Act to include Section 1 of that Act and the enforcement of Section 13 of the Education Act, 1918, so far as it applies at the earliest date. I advise also that before licences are granted the Medical Officer should be consulted as to the physical fitness of the child."

Following upon this, the Education Committee appointed a small sub-committee to go into the matter, and recommendations were made to the Town Council to increase the age under the bye-laws to 13, and that prior to the issue of any further licences for street trading the applicants should be medically examined, and that it would be advisable to adopt this course in respect of those lads to whom licences have already been issued.

In accordance with the latter recommendation a list of 39 boys was sent to whom licences had already been issued, and these were instructed to appear for medical examination.

Thirty-four of the 39 appeared and 13 were found physically unfit for such employment; 10 were found partially fit and recommended for employment after school hours only and not more than four hours daily; one was sanctioned for partial employment during holidays only; whilst 10 only were noted as being physically fit for employment covered by the bye-laws.

The fact that less than one-third of those licensed by the Watch Committee were found physically fit should be sufficient evidence of the urgent necessity for following the course I have so frequently urged.

One girl of 12 years was found to be employed  $7\frac{1}{4}$  hours daily, in addition to attending school; on Saturdays and holidays she put in 13 hours without a break, having her meals in



her place of employment, and on Sundays working  $8\frac{1}{2}$  hours, a total, week in and week out, of  $57\frac{1}{2}$  hours weekly, and attending school. In this case the employer was prosecuted for unlawfully employing a child, was convicted and fined £1 6s. The step-father of the child, it was stated, could earn a minimum of £10 per week at that time, when he cared to work, so poverty was no excuse for this sweating of the child.

We found in our investigations that the employment of children was only rarely due to the poverty of a family, requiring such additional financial assistance. In the case of boys the greater part of the earnings was spent in cigarettes and in attending cinema shows.

The cigarette smoking amongst boys became such a scandal that the Chairman of the Education Committee had to publicly call attention to it, that section of the Children's Act dealing with the smoking of children being openly ignored. Since the preceding steps were taken, no further progress has been made towards amending and extending the bye-laws, and bringing them into line with the Education Act of 1918 and the above recommendations.

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### **PROVISION OF MEALS.**

In November I reported to the Education Committee that distress existed in the district, and that many school children were not receiving a supply of food adequate to their needs, and recommended that they should exercise their powers to provide a meal or meals to such school children as may be suffering from a lack of food.

This recommendation was adopted, and steps taken to form two School Canteen Committees to carry out a scheme. At the end of the year all necessary arrangements had been made by one of the Committees to provide a dinner for

*necessitous* children at the re-opening of the schools after the Christmas holidays. The proceedings of the second Committee had at that time not been developed.

The difficulty of finding a suitable building or buildings to accommodate a large number of children led to the Committees limiting the provision of a dinner to only the most *necessitous* children, and the School Medical Staff undertook a personal investigation of all cases and reported their findings. These were revised and commented upon by the full Committee, who then selected the cases of known and absolute necessity.

### **HYGIENIC CONDITION OF SCHOOLS.**

Full reports have been made in pre-war years as to the deficiencies in the various schools, and though some of these were attended to, the major portion has remained as formerly during the period of storm and stress, and must at an early date have some attention.

*Sanitary.* The sanitary arrangements of the newer schools, Cromwell Road, St. Augustine's, and Melcombe Regis, are modern and efficient and are kept satisfactory. Holy Trinity and St. Paul's have been re-constructed and are satisfactory. St. Mary's Infants and Girls have also been re-constructed, but the former unfortunately perpetuated the old automatic flushing of the water closets, which is unsatisfactory both from a sanitary and educational point of view. It is in early life that good habits are engendered, and if at school an infant is not taught to immediately remove excretal products by use of the flushing cistern, they are not likely to vary the system when at home.

The same applies to St. John's Infants' School, where the conditions are even worse, as at all times the boys' urinal smells offensively. There is no provision made at this school



of sanitary accommodation for the staff, a defect to which attention has been frequently called.

*Lavatory or Washing Accommodation.* This is seriously deficient at St. John's Boys' and Infants' Schools, and requires amendment at the Girls' School.

Holy Trinity Infants' and Boys' Schools are also sadly deficient.

*Cleansing.* The daily cleansing has been satisfactorily carried out at the various schools, with the exception of St. Mary's Girls' and Infants', where slipshod methods still continue. We have so frequently commented upon this matter to the managers, without avail, that further expostulation seems useless. The scheme of painting of the walls requires to be carefully considered for the future, the dull brown introduced in recent years being detrimental alike to the children's eyesight and to the proper diffusion of light.

*Ventilation of Schools.* This is satisfactory, with the exception of certain class-rooms at Cromwell Road Schools, which were fully reported upon in 1912, and later were the subject of a report or comment of H.M. Inspector of Schools.

*Lighting.* Lighting still remains deficient at St. John's Boys' and Holy Trinity Boys' as regards one class-room of each, and is made worse by the inability to so arrange the seating as to make the best of what there is. St. Mary's Infants' is prison alike in its formation with the windows high up, giving a very defective light even on the brightest of days.

*Equipment.* The provision of modern desks of the dual type at St. John's, St. Mary's, and Holy Trinity Schools is a matter of urgent necessity, and as the continued use of the



long obsolete type of desk in use at these schools is conducive to unnatural postures tending to the development of permanent physical defects, and hinders the arrangement of the rooms in appropriate fashion where the question of lighting is concerned.

*Cloak Room Accommodation.* This has improved somewhat in those schools formerly reported as defective, though some are still capable of further improvement.

*Heating.* This is generally satisfactory, with the exception of St. John's Boys' School.

Table 1.—Number of Children Inspected from 1st January, 1919, to 31st December, 1919.

A "CODE" GROUPS.

Age.	Entrants						Inter- mediate Group	Leavers					Grand Total
	3	4	5	6	Other Ages	Total		12	13	14	Other Ages	Total	
Boys...	...		205	29	56	290	176	141	15		332	622	
Girls	...	1	141	32	29	203	148	116	58		322	525	
TOTALS	...	1	346	61	85	493	324	257	73		654	1147	

B. GROUPS OTHER THAN "CODE" X

	Intermediate Group (other than 8 years)		Special Cases		Re-examinations i.e. Number of Children Re-examined.	
	2	3	3	4		
Boys ...	53		16		119	
Girls ...	46		18		243	
Totals...	99	—	34	—	362	

Table II.

Return of Defects found in the course of Medical Inspection, in 1918

Defect or Disease.		Code Groups.		Specials.	
		Number referred for treatment.	Number requiring to be kept under observation but not referred for treatment	Number referred for treatment.	Number requiring to be kept under observation, but not referred for treatment.
(1)		(2)	(3)	(4)	(5)
Skin	Malnutrition .....	...	15		
	Uncleanliness:				
	Head .....	113	...		
	Body .....	20	...		
	Ringworm:				
	Head .....	1	...		
	Body .....	...	...		
	Scabies .....	6	...		
	Impetigo .....	7	...		
	Other Disease .....	10	...		
Eye	Defective Vision and Squint ....	68	40		
	External Eye Disease .....	13	...		
Ear	Defective Hearing .....	...	6		
	Ear Disease .....	7	...		
Teeth	Dental Disease .....	344	410		
Nose and Throat	Enlarged Tonsils .....	61	302		
	Adenoids .....	...	43		
	Enlarged Tonsils and Adenoids ...	16	74		
	Defective Speech .....	...	11		
Heart and Circulation.	Heart Disease:				
	Organic .....	7	...		
	Functional .....	7	...		
Lungs	Anæmia .....	1	...		
	Pulmonary Tuberculosis:				
	Definite .....	2	...		
	Suspected .....	1	...		
	Chronic Bronchitis .....	4	...		
	Other Disease .....	..	3		
Nervous System	Epilepsy .....	...	4		
	Chorea .....	..	...		
	Other Disease .....	...	...		
	Non-Pulmonary Tuberculosis:				
	Glands .....	5	...		
	Bones and Joints .....	2	...		
	Other Forms .....	1	..		
	Rickets .....	2	...		
	Deformities .....	2	...		
	Other Defects or Diseases .....	10	...		



Table III.—Numerical Return of all Exceptional Children  
in the Area, 1919.

			Boys	Girls	Total
Blind (including partially blind)		Attending Public Elementary Schools	1	...	1
		Attending Certified Schools for the Blind	1	...	1
		Not at School .....	...	...	..
Deaf and Dumb (including partially deaf)		Attending Public Elementary Schools	...	1	1
		Attending Certified Schools for the Deaf	...	1	...
		Not at School .....	...	1	1
Mentally Deficient	Feeble Minded	Attending Public Elementary Schools	...	1	1
		Attending Certified Schools for Mentally Defective Children .....	...	...	...
		Notified to the Local (Control) Authority during the Year .....	...	...	...
		Not at School .....	..	..	...
	Imbeciles	At School .....	...	1	...
		Not at School .....	..	1	1
	Idiots	.....	...	1	1
		.....	...	...	...
		.....	...	...	...
Epileptics		Attending Public Elementary Schools	2	...	2
		Attending Certified Schools for Epileptics	...	..	...
		Not at School .....	1	1	2
Physically Defective	Pulmonary Tuberculosis	Attending Public Elementary Schools	3	5	8
		Attending Certified Schools for Physi- cally Defective Children .....	...	...	...
		Not at School .....	2	2	4
	Other forms of Tuberculosis	Attending Public Elementary Schools	1	4	5
		Attending Certified Schools for Physi- cally Defective Children .....	...	...	...
		Not at School .....	2	...	2
	Cripples other than Tubercular	Attending Public Elementary Schools	3	...	3
		Attending Certified Schools for Physically Defective Children .....	...	...	...
		Not at School .....	1	...	1
Dull or Backward §		Retarded 2 years .....	38	99	137
		Retarded 3 years .....	...	6	6

§Judged according to age and standard.

Table IV.—Treatment of Defects of Children during 1919.

Condition	No of defects found for which Treatment was considered necessary			No of defects for which no report is available	No of defects treated	Results of Treatment			No of defects not treated	Per-centage of defects treated
	From previous year	New	Total			Remedied	Improved	Un- changed		
Clothing .....	...	4	4		4	...	...	...	...	100
Footgear .....	..	8	8		8	...	...	...	...	100
Cleanliness of head .....	...	143	143		143	...	...	...	...	100
Cleanliness of body .....	..	28	28		28	...	...	...	...	100
Nutrition .....	..	...	...		...	...	...	...	...	100
Nose and throat .....	158	77	235	185	...	...	...	...	27	65
External eye disease ...	...	18	18		18	...	...	...	...	100
Ear disease .....	...	9	9		9	...	...	...	...	100
Teeth .....	...	344	344	240	104	...	3	4	...	30
Heart and Circulation ...	...	15	15	6	9	2	8	2	...	60
Lungs .....	...	14	14		14	4	...	...	...	100
Nervous system .....	..	...	...		...	...	...	...	...	...
Skin .....	...	43	43		43	43	...	...	...	100
Rickets .....	..	2	2		2	...	2	...	...	100
Deformities .....	...	2	2		2	...	2	...	...	100
Tuberculosis — non-pulmonary .....	...	8	8		8	...	8	...	...	100
Speech .....	...	...	...		...	...	...	...	...	...
Mental condition .....	..	...	...		...	...	...	...	...	...
Vision and squint .....	...	68	68		68	68	...	...	...	100
Hearing .....	...	...	...		...	...	...	...	...	...
Miscellaneous .....	...	40	40		40	40	...	...	...	100
TOTAL.	158	835	981	431	543	521	23	6	27	

Table V.

## Inspection, Treatment, &amp;c., of Children during 1919.

(1) The total number of children medically inspected (whether Cope Group, special or ailing child) ...	1642
(2) The number of children in (1) suffering from defects (other than uncleanliness or defective clothing or footgear) who require to be kept under observation (but not referred for treat- ment) .....	908
(3) The number of children in (1) who were referred for treatment (excluding uncleanliness, defec- tive clothing, etc.) .....	574
(4) The number of children in (3) who received treatment for one or more defects (excluding uncleanliness, defective clothing, etc.) .....	279